

# WANAWAWA UMIL THE UPDATED CITIZEN'S CHARTER OF SAN ILDEFONSO, ILOCOS SUR

2023 1<sup>st</sup> EDITION

#### MANDATE:

Deriving its mandate from the Republic Act 7160 or otherwise known as the Local Government Code of 1991, the mission to follow the people's welfare under Section 16 of the Code, to wit: General Welfare: Every LGU shall exercise the powers expressly granted, those necessarily implied therefrom, as well as powers, necessary, appropriate, or incidental for its efficient and effective governance and those which are essential to the promotion of the general welfare within their respective territorial jurisdictions. LGU shall ensure and support among other things, the preservation and enrichment of culture, promote health and safety, enhance the right of the people to a balance ecology, encourage and support the development of appropriate and self-reliant scientific and technological capabilities, improve public morals, enhance economic prosperity and social justice, promote full employment among their residents, maintain peace and order, and preserve the comfort and convenience of their inhabitants.

### VISION

Alistoprogress, San Aldefonso!

A thriving town in the north, home of national government agencies and a sanctuary of educational excellence with innovative and compassionate leaders, safe environment, and satisfied citizenry.

### MISSION

Accelerated cultural and tourism programs capitalizing its cultural resources thus enticing everybody.

Leveraged social programs to ensure effective and efficient service delivery.

mproved infrastructure facilities and health and safety programs for a risk resilient locality,

Sustained environmental protection services for a balanced ecosystem.

Transcended economic opportunities as ECONOMIC MAGNET of the NORTH,

Optimized institutionalized capability for its people who are disciplined, God-loving, modest and hard-working, educated and future-ready.

#### SERVICE PLEDGE

We are an organization of dedicated, efficient, and courteous personnel, who adhere to the highest ethical standards of government service, and who devote our energies for the benefit of the people of San Ildefonso.

We have a responsive system, which ensure effective delivery of services.

Our personnel are the greatest and are committed to delivering quality service to our constituents.

To pursue these goals, we pledge to:

#### People Empowerment with

• Participative Civil Society Organizations (CSO) and Private Organizations (PO)

#### Renewed Dynamism and transparency ${\rm of}$

- Bids and Awards Committee (BAC)
- Gender and Development (GAD)

#### Overwhelming commitment and dedication thru

- Agricultural Productivity enhancement
- Seed and Fertilizer Subsidy
- Livelihood Projects

#### Good Governance towards

- Human Resource Development (HRD)
- Capacity Development

#### Rural Development attaining

- Improved infrastructure facilities
- Technology Transfer
- Communication and transportation

#### Economic and Ecological Balance under

- Solid Waste Management
- Investment Promotion/Tourism Industry

#### **Service** Oriented

• Social Services (Health and sanitation, education, social welfare, peace and order and public safety)

#### Organizational Management System Based on

• Executive Legislative Agenda

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## **MAYOR'S OFFICE**

**External Services** 

#### 1. ISSUANCE OF MAYOR'S CLEARANCE

The Mayor's Clearance certifies that the individual is a resident of the municipality, of good moral character and is a law-abiding citizen.

The clearance is a document usually availed by individuals seeking employment, scholarship, for a firearms license and for any other legal purpose.

	Office or Division:	Office of the May	or		
	Classification:	Simple			
	Type of Transaction:	G2C – Governme	nt to Citizen		
	Who may avail:	Residents of San I	Idefonso, Iloco	s Sur	
	CHECKLIST OF REQU	REMENTS	WHERE	TO SECURE	
2.	Request letter Latest Community Tax Official Receipt Barangay Clearance 2 valid government ID		Municipo	al Treasury	
	CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIB LE
1.	Sign in the logbook & submit all requirements.	<ul> <li>1.1. Receive and review the requirements if complete and duly signed.</li> <li>1.2. Issue order of Payment</li> </ul>	None	1 minute	Nivea Nissi R. Jara Administrati ve Officer II
2.	Receive order of payment and pay	2.1 Receive payment and issue Official Receipt and documentary stamp.	Php 70.00 plus Php 30.00 doc stamp	5 mins	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong Revenue Collection Clerk II

<ul> <li>3. Present Official receipt at the Mayor's Office</li> <li>4. Receive the Mayor's clearance</li> </ul>	3.1.Prepare the clearance. 3.2.Sign the Clearance/ Certificate 4.1.Record, and release the	None	5 minutes	Nivea Nissi R. Jara Administrati ve Officer II Christian Daniel "Basi" A. Purisima Municipal Mayor Nivea Nissi R. Jara
	clearance.		10 minutes	Administrati ve Officer II
		Php10	12 minutes	
	TOTAL	0.00		

#### 2. ISSUANCE OF CERTIFICATE OF GOOD MORAL CHARACTER

This service is intended for students availing of scholarship grant and job applicants.

	Office or Division:	Office of the Mayor			
(	Classification:	Simple			
•	Type of Transaction: Who may	G2C – Government to Citizen			
	avail:	Residents of Sc	· · · · ·	TO SECURE	
•	<ul> <li>Barangay Certification (stating that the client is a resident of the barangay and has no derogatory records) (1 Original Copy)</li> </ul>		Barango	ау	
	CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	Submit barangay Certification and receive order of payment	<ol> <li>1.1 Receive and review clearance and issue order of payment breakdown</li> </ol>	None	2 minutes	Nivea Nissi R. Jara Administrative Officer II
2. 1	Pay	2.1 Receive payment and issue Official Receipt.	Php 70.00 plus Php 30.00	5 minutes	Teresita Rojas Revenue Collection Clerk III

		the Certification. TOTAL	Php 100.00	15 minutes	Administrative Officer II
4.	Receive the certification	4.1 Record, and release	None	2 minutes	Nivea Nissi R. Jara
		3.2 Sign the Certification			Daniel "Basi" A. Purisima Municipal Mayor
	receipt at the Mayor's Office	certification to be signed by the Mayor.		1 minute	Administrative Officer II Christian
3.	Present Official	3.1 Prepare the	None	3 minutes	Clerk II Nivea Nissi R. Jara
					Alvin O. Batuyong Revenue Collection
					Designate/ Revenue Collection Clerk III
			doc stamp		Merriam C. Revibes BPLO

#### 3. AVAILING OF PUBLIC CUSTOMER ASSISTANCE

Residents of the Municipality and other clients may request from the Mayor's Office for job recommendations. Job Recommendations for Residents of San Ildefonso, Ilocos Sur

_	fice or vision:	Office of the Mayor			
Clo	assification:	Simple			
-	pe of ansaction:	G2C – Governmer	nt to Citizen		
	no may ail:	Residents of San Ildefonso, Ilocos Sur			
СН	CHECKLIST OF REQUIREMENTS WHERE TO SECURE		TO SECURE		
1. Ba Phe	<b>r Job Recomn</b> rangay Certif otocopy) quest Letter	nendations: icate of Residency (1	Barang Applice		
CL	IENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE

<ol> <li>Sign in the logbook and submit request letter or the pertinent documents required</li> </ol>	1.1 Receive and review the documents	None	2 minutes	Nivea Nissi R. Jara Administrative Officer II
2. Proceed to Treasurer's Office to pay prescribed fee	2.1 Receive payment and issue Official Receipt.	None	5 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong Revenue Collection Clerk II
<ol> <li>Present Official receipt at the Mayor's Office</li> </ol>	3.1 Prepare the Appropriate communication regarding the request to be signed by the Mayor.	None	5 minutes	Nivea Nissi R. Jara Administrative Officer II
	3.2 Approve the request for assistance, recommendation, and endorsement.		1 minute	Christian Daniel "Basi" A. Purisima Municipal Mayor
4. Receive the certification	4.1 Record, and release the Certification.	None	1 minutes	Nivea Nissi R. Jara Administrative Officer II
	TOTAL		14 minutes	

#### 4. USE OF GOVERNMENT FACILITIES

The Municipal Government of San Ildefonso, Ilocos Sur offers the use of the following facilities ideal for seminars, conferences, gatherings, sports, and other activities:

- Town Plaza
- Covered Court
- Roof Deck
- Mango Haven
- Government Vehicle (Dump Truck, L-300 Multi- Purpose Vehicle, Backhoe Loader (mini))

Office or				
Division:	Office of the Mo	ayor		
Classification:	Simple			
Type of Transaction:	G2C– Government to Citizen			
Who may avail:	Corporations, G	roups and other	Individuals and Entit	ies
CHECKLIST OF RE	QUIREMENTS	WHERE T	O SECURE	
<ol> <li>Letter request adda specifying the gove used, date, time, ar Original)</li> </ol>	ernment facility to be	Requestin	-	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Sign in the	1.1 Receive	Refer	2 minutes	Nivea Nissi R.
logbook and	and review	to		Jara
submit the	the request	chart		Administrative
request letter	letter		1 minute	Officer II
and receive order of	1.2 Issue		i minute	
payment	order of			
payment	payment			
1. Pay	2.1 Receive	Refer	5 minutes	Teresita Rojas
,	payment and	to		Revenue
	issue Official	Chart		Collection
	Receipt.			Clerk III
				Merriam C.
				Revibes
				BPLO Decimento (
				Designate/ Revenue
				Collection
				Clerk III
				Alvin O.
				Batuyong
				Revenue
				Collection
				Clerk II
2. Present the	3.1 Prepare	None	5 minutes	Nivea Nissi R.
Official Receipt	the permit			Jara
at the Mayor's Office				Administrative Officer II
				Christian
	3.2 Sign the			Daniel "Basi"
	permit			A. Purisima
	I			Municipal
				Mayor

<ol> <li>Receive the Mayor's Permit and leave one (1) copy with the Records Section for file.</li> </ol>	4.1 Issue Mayor's Permit	None	2 minutes	Nivea Nissi R. Jara Administrative Officer II
TOTAL			15 minutes	

	FEES TO BE PAID					
Government Facility	Particulars	Amount				
Government Vehicle	Dump Trucks	P500.00/hour				
	Backhoe Loader (mini)	P1,200.00/hour				
Land Only	Commercial/Residential	P110.00 - P175.00/month				
		per sqm				
Buildings	Covered Court	P600.00/hour				
	Function Hall (Pasalubong	P5,000(min of 4 hours)				
	Center), Roof Deck and	+P1500.00 for excess				
	Mango Haven	P100.00/month per sqm				
	Located in					
	commercial/industrial/residential					

#### **5. PUBLIC USE OF GOVERNMENT VEHICLES**

The Municipal Government of San Ildefonso, Ilocos Sur offers the use of Government Vehicle (Dump Truck, L-300 Multi- Purpose Vehicle) for official purposes.

	Office or Division:	Office of the Mayor			
	<b>Classification:</b>	Simple			
	Type of Transaction:	G2C– Governm	ent to Citizen		
	Who may avail:	Corporations, G	roups and othe	er Individuals and Ent	ities
	CHECKLIST OF REG	QUIREMENTS WHERE TO SECURE			
2.		ressed to the Mayor, ernment facility to be nd purpose (1	Requesting Client		
	CLIENT STEPS AGENCY ACTION		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
2.	Sign in the logbook and submit the request letter and receive	1.1 Receive and review the request letter	Refer to chart	2 minutes 1 minute	Nivea Nissi R. Jara Administrative Officer II

order of payment	1.2 Issue order of payment			
4. Pay	2.1 Receive payment and issue Official Receipt.	Refer to Chart	5 minutes	Teresita Rojas Revenue Collection Clerk III
				Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III
				Alvin O. Batuyong Revenue Collection Clerk II
5. Present the Official Receipt at the Mayor's Office	3.1 Prepare the permit	None	5 minutes	Nivea Nissi R. Jara Administrative Officer II
	3.2 Sign the permit			Christian Daniel "Basi" A. Purisima Municipal Mayor
<ol> <li>Receive the Mayor's Permit and leave one (1) copy with the Records Section for file.</li> </ol>	4.1 Issue Mayor's Permit	None	2 minutes	Nivea Nissi R. Jara Administrative Officer II
TOTAL			15 minutes	

FEES TO BE PAID							
Government Facility Particulars Amount							
Government Vehicle	Dump Trucks	P500.00/hour					
Backhoe Loader (mini) P1,200.00/hour							

#### 6. ISSUANCE OF MUNICIPAL CLEARANCE TO CUT TREES

The issuance of Mayor's Clearance to cut tree/s is in compliance to DENR mandate towards tree preservation and conservation.

Office or	
Division:	Mayor's Office
<b>Classification</b> :	Simple
Clussification:	Simple
Type of	
Transaction:	G2C– Government to Citizen

Who may avail:						
CHECKLIST OF	REQUIREMENTS	WHERE T	WHERE TO SECURE			
<ol> <li>Letter Request (1</li> <li>Barangay Clear copy)</li> <li>Latest Communit (Cedula) Officia</li> </ol>	l original copy) ance (1 Original y Tax Certificate	- Barangay				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
<ol> <li>Sign in the logbook, submit the requirements and receive order of payment</li> </ol>	<ol> <li>1.1 Review the completeness of the requirements submitted issue order of payment</li> </ol>	None	2 minutes	Nivea Nissi R. Jara Administrative Officer II		
2. Pay	2.1 Receive payment and issue official receipt	Php 70.00 plus Php 30.00 doc stamp	5 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong Revenue Collection Clerk II		
3. Present the Official Receipt	3.1 Prepare the permit 3.2 Sign the	None	4 minutes 1 minute	Nivea Nissi R. Jara Administrative Officer II Christian Daniel "Basi"		
	permit			A. Purisima Municipal Mayor		
4. Receive the document	4.1 Release or Issue the permit	None	1 minutes	Nivea Nissi R. Jara Administrative Officer II		
TOTAL		Php 100.00	13 minutes			

#### 7. ISSUANCE OF PERMIT TO WORK

Ensure all working staff of certain business establishment secure working permit such as Restaurant, fast food, tailoring, grocery, etc.

Office or						
Division:	Office of the	e Mayor				
<b>Classification</b> :	Simple					
Type of						
Transaction: Who may	G2C- Gove	G2C– Government to Citizen				
avail:	Residents of	the Municipality	у			
	REQUIREMENTS	WHERE T	O SECURE			
1. Valid ID (1 photo	сору)	- To be pre	esented by the client			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
<ol> <li>Sign in the logbook, submit your name and position or work applied for and receive order of payment</li> </ol>	<ul> <li>1.1</li> <li>Review</li> <li>the</li> <li>documents</li> <li>submitted</li> <li>1.2 Issue</li> <li>order of</li> <li>Payment</li> </ul>	None	2 minutes	Nivea Nissi R. Jara Administrative Officer II		
2. Pay the corresponding fee	2.1 Receive payment and issue OR 2.2 Sign the permit	Php 250.00	5 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong Revenue Collection Clerk II		
3. Present the Official receipt	3.1 Prepare the permit 3.2 Sign the permit	None	2 minutes 1 minute	Nivea Nissi R. Jara Administrative Officer II Christian Daniel A. Purisima Mayor		

4. Receive the document	3.3 Release the permit	None	1 minute	Nivea Nissi R. Jara Administrative Officer II
TOTAL		Php 250.00	11 minutes	

# MUNICIPAL SOCIAL WELFARE AND DEVELOPMENT OFFICE

External Services

#### 1. PROVISION OF FINANCIAL ASSISTANCE

The Municipal Social Welfare and Development Office assist indigent families and individuals for possible financial assistance based on their felt needs.

Office or Division: Municipal Social Welfare and Development Office					
Classification:	Simple				
	G2C – Government	to Client			
Type of Transaction:					
Who may avail:	All residents of San				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
FOR MEDICAL ASSISTANCE					
1. Medical Certificate		Attending Physician			
Certificate of confir					
doctor's diagnosis d					
Original or certified					
2. Medical prescriptio	n (1 Original or	Attending Physician			
certified true copy)					
3. Referral for laborate		Attending Physician			
procedure (1 Origin	nal or certified true				
сору)					
4. Statement of account	unt- for	Hospital			
hospitalization (1 Or	riginal or certified				
true copy)					
5. Barangay certificat	ion of Indigency	Punong Barangay			
with a purpose of se	eeking medical				
assistance (1 Photo	copy)				
6. Running bill or prom	nissory note from the	Hospital			
hospital billing assist	ance for unpaid				
hospital billing assist	ance)				
7. Affidavit if same pe					
indicated on their p					
misspelled or does r					
name extension.					
8. Treatment protocol	with price	Attending Physician			
quotation (e.g. for	•				
treatment and othe					
9. Certificate of coha	bitation/birth				
certificate of their c	hildren of proof of				
their cohabitation.	I I				
10. Valid I.D. of patien	t and client	Client			
address(1 Photocop					
11. Official receipts (1 (		Hospital/Drugstore			
FOR BURIAL ASSISTA					
1. Death Certificate (1		Local civil registrar			
2. Funeral contract (1	, , ,	Funeral parlor			
3. Barangay certificat		Punong Barangay			
Original)					
4. Photocopy of valid	ID of claimant (1	Client			
Photocopy)					
5. Duly signed Claima	nt's waiver (1	Client			
Original)					
FOR FOOD ASISTAN	CE				
1. Barangay certificat		Barangay Captain			
Original)					
FOR EDUCATIONAL	ASSISTANCE				
1.					

2. Photocopy of parer valid ID	Client			
3. Photocopy of registr certificate of enrollr	School			
4. Statement of accou	unt from school/ or	School		
5. House Photo (kitche		Client		
bedroom and com		Cliotti		
6. Barangay Certificat		Baranga	y Captain	
FOR EMERGENCY SH				
1. Copy of Barangay in purpose		Baranga	y Captain	
2. Copy of valid identi client address		Client		
3. Court order or notic any	e of violation, if			
4. Certificate that they the calamity		Baranga	y Captain	
5. Barangay Blotter Re requirement for thos evicted	•	Baranga	y Captain	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Submit the needed requirements	1. Interview, assess client's needs and prepare papers for assistance	None	10 minutes	Servitas P. Romano Municipal Social Welfare and Development Officer Geraldine P. Bragado Social Welfare Assistant Mary Jane Lacasandile Day Care Worker Marishir M. Alamar Social Welfare Aide Laila R. Raña Social Welfare Aide Helen Grace F. Galzote Social Welfare Aide Brenda P. Pilar Social Welfare Aide

2. Responds to the interview and sign the necessary documents needed	2.1 Submit assessed client's documents to other concerned offices for signatures and release of funding (For more than Php 3,000.00)		10 minutes	Servitas P. Romano Municipal Social Welfare and Development Officer Geraldine P. Bragado Social Welfare Assistant
<ul> <li>3. Submit the duly signed AICS form and other needed documents for processing</li> <li>4. Sign and receive financial assistance</li> </ul>	3.1 Prepare the Petty cash voucher 4.1 Releasing of financial assistance		10 minutes 2 minutes	Servitas P. Romano Municipal Social Welfare and Development Officer Geraldine P. Bragado Social Welfare Assistant Mary Jane Lacasandile Day Care Worker Marishir M. Alamar Social Welfare Aide Laila R. Raña Social Welfare Aide Helen Grace F. Galzote Social Welfare Aide Brenda P. Pilar Social Welfare Aide
TOTAL		None	32 minutes	

#### 2. PREPARATION OF SOCIAL CASE STUDY REPORT AND REFERRAL LETTER FOR PCSO, HOSPITALS, GOVERNMENT AND NON-GOVERNMENT INTITUTIONS TO AVAIL MEDICAL/FINANCIAL ASSISTANCE

The Municipal Social Welfare and Development Office had developed a network of referral system to other government and non-government agencies to link indigent individuals and families for various program and services.

Office or Division:	Municipal Social Welfare and Development Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Client			
Who may avail:	Walk-in Client			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Medical Certificate/Ak	Attending Physician			
2. Barangay Certification of Indigency (1		Punong Barangay		
Original)				

3. Medical Prescription (1 Photocopy)			ing Physician	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the needed documents	Verify the completeness of the documents	None	2 minutes	Servitas P. Romano Municipal Social Welfare and Development Office Geraldine P. Bragado Social Welfare Assistant
2. Answer/responds to the interview	2.1 Interview, assess and facilitate accomplishment of required documents	None	20 minutes	Servitas P. Romano Municipal Social Welfare
3. Receive documents	3.1 Releasing of documents	None	2 minutes	and Development Officer Geraldine P. Bragado Social Welfare Assistant
TOTAL		None	24 minutes	

### 3. ISSUANCE OF IDENTIFICATION CARD AND BOOKLET FOR SENIOR CITIZENS, PERSONS WITH DISABILITY AND SOLO PARENTS

The Municipal Social Welfare and Development Office is mandated to provide I.D. to above mentioned clientele group to avail their special privileges as stated in their respective laws.

Office or Division:	Municipal Social Welfar	e and Development Office		
Classification:	Simple			
Type of	G2C – Government to (	Client		
Transaction:				
Who may avail:	Senior Citizen, PWD, Solo Parent			
CHECKLIST OF REQUI	JIREMENTS WHERE TO SECURE			
For Senior Citizen	Senior Citizen			
- Birth Certifica	- Birth Certificate/Valid I.D. with MCR			
birthdate (1 P	hotocopy)			
- 1x1 picture (2	pcs)	Studio of choice		
- Certificate of	Residency (1	Barangay Hall		
Original/Photo	эсору)			
- Senior Citizen	Application Form (1	MSWDO		
original)				
For Person with Disab	oility			
- Certificate of	Residency ( 1 original)	Attending Physician		

	ficate/ Medical	мно			
	ginal) Disability from the				
Barangay	ation from the	Studio of choice			
Municipal Hee - Whole body p	alth Office (1 original) picture and 1 pc. 1 x 1	MSWDO			
picture (1 pc) - PWD duly acc Form (1 origin	complished Application	MCR			
For Solo Parent		Barangay Captain			
<ul> <li>Birth certificate of children below 22 years old or above 22 years old but with disability(1 Photocopy)</li> </ul>		MSWDO			
<ul> <li>with disability(1 Photocopy)</li> <li>Certificate of Solo Parent from</li> </ul>					
Barangay Captain (1 Original) - Solo Parent Application Form (1		Barang	ay Treasurer		
Original) - Marriage Certificate ( if married)					
dead)	- Death Certificate ( if the spouse is dead)				
- Copy of filed/ pending petition for annulment of marriage of marriage					
<ul><li>or legal separation ( if any)</li><li>Certificate of income</li></ul>					
- Two pcs 1×11	D picture	FEES			
CLIENT STEPS	AGENCY ACTIONS	TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit all the	1.1 Assist and	None	5 minutes	Servitas P.	
requirements	interview client 1.2 Verify the completeness of the documents		5 minutes	Romano Municipal Social Welfare and Development Officer	
				Geraldine P. Bragado Social Welfare Assistant	
				Mary Jane Lacasandile Day Care Worker	
				Marishir M. Alamar Social Welfare Aide	
				Laila R. Raña Social Welfare Aide	

1. Fill up Form For Senior Citizen - Senior Citizen Application Form (1 original)	3.1 Accept filled up forms and process corresponding I.D.	15 minutes	Helen Grace F. Galzote Social Welfare Aide Brenda P. Pilar Social Welfare Aide Servitas P. Romano Municipal Social Welfare and Development Officer Geraldine P. Bragado Social Welfare Assistant Mary Jane Lacasandile Day Care Worker Marishir M. Alamar Social Welfare Aide Laila R. Raña Social Welfare Aide Laila R. Raña Social Welfare Aide Helen Grace F. Galzote Social Welfare Aide
			Brenda P. Pilar Social Welfare Aide
For Person with Disability - PWD Application Form (1 original) For Solo Parent - Solo Parent Application Form (1 Original)			Servitas P. Romano Municipal Social Welfare and Development Officer Geraldine P. Bragado Social Welfare Assistant

TOTAL       None       27 minutes       Helen Grace F. Galzote Social Welfare Aide	Alamar Social We Aide Laila R. Ro Social We Aide Helen Gro	Assistant Mary Jane Lacasandile Day Care Worker		Booklet	4.1 Release the privilege ID and booklet	None		Romano Municipal Socia Welfare and Development Officer Geraldine P. Bragado Social Welfare Assistant Mary Jane Lacasandile Day Care Worker Marishir M. Alamar Social Welfare Aide Laila R. Raña Social Welfare Aide Helen Grace F. Galzote Social Welfare Aide Brenda P. Pilar Social Welfare
Image: Second Welfare       Social Welfare         Assistant       Mary Jane         Lacasandile       Day Care         Vorker       Marishir M.         Alamar       Social Welfare         Social Welfare       Laila R. Raña         Social Welfare       Social Welfare	Bragado Social We Assistant Mary Jan Lacasand Day Care	Bragado Social Welfare	2.	Receive ID and Booklet			2 minutes	Municipal Soci Welfare and Development

#### 4. CENTENARIAN AND NONAGENARIAN CASH INCENTIVE

The Municipal Social Welfare and Development Office is providing cash incentive granting Ten Thousand Pesos (Php 10,000.00) to Senior Citizen who reaches the age of one hundred (100) years. Another Five Thousand Pesos (Php 5,000.00) will be given to the living centenarian on the following years thereafter. For Nonagenarian, three thousand pesos to senior citizen who reaches the age of 90-99 years. This incentive is the local counterpart to our centenarians in addition to the national government cash grant. This encourages healthy lifestyle to our constituents to lead a longer and healthier life.

Office or Division:	Municipal Social Welfare and Development Office
Classification:	Simple
Type of	G2C – Government to Client
Transaction:	
Who may avail:	100 years old and above

Image: Second								
2. Birth certificate/marriage/baptismal (1 Photocopy)       MCR/PSA         3.Recent whole-body photo of the living nonagenarian/centenarian (1 pc)       Studio of choice         CLIENT STEPS       AGENCY ACTIONS       FEES TO BE PAID       PROCESSING TIME       PERSON RESPONSIBLE         1. Submit requirements       1.1 Check the completeness of the Requirements.       None       45 minutes       Servitas P. Romano Municipal Social Welfare and Development         1.2 Interview and verify the validity of the submitted requirements       1.3 Facilitate and submit the documents to the concerned offices for the preparation of the Centenariani incentive       None       5 minutes       Mary Jane Lacasandile Day Care Worker         2. Receive SC cash incentive       3.1 Distribute the cash grant thru door-to-door delivery       None       5 minutes       Marishir M. Alamar Social Welfare Aide         Laila R. Raña Social Welfare Aide       Social Welfare Aide       Helen Grace F. Gaizote Social Welfare Aide				TO SECURE				
Photocopy)       3.Recent whole-body photo of the living nonagenarian/centenarian (1 pc)       Studio of choice         CLIENT STEPS       AGENCY ACTIONS       FES TO BE PAID       PROCESSING TIME       PERSON RESPONSIBLE         1. Submit requirements       1.1 Check the completeness of the Requirements.       None       45 minutes       Servitas P. Romano Municipal Social Welfare and Development Officer         1.2 Interview and verify the validity of the submitted requirements       1.3 Facilitate and submit the documents to the concerned offices for the preparation of the Centenarian incentive       None       5 minutes       Servitas P. Romano Municipal Social Welfare Aide         2. Receive SC cash incentive       3.1 Distribute the cash grant thru door-to-door delivery       None       5 minutes       Marishir M. Alamar Social Welfare Aide         Laila R. Raña Social Welfare Aide       Social Welfare Aide       Brenda P. Pilar Social Welfare Aide								
nonagenarian/centenarian (1 pc)CLIENT STEPSAGENCY ACTIONSFES TO BE PAIDPROCESSING TIMEPERSON RESPONSIBLE1. Submit requirements1.1 Check the completeness of the Requirements.None45 minutesServitas P. Romano Municipal Social Welfare and Development Officer1.2 Interview and verify the validity of the submitted requirementsNone45 minutesServitas P. Romano Municipal Social Welfare and Development Officer1.3 Facilitate and submit the documents to the concerned offices for the preparation of the Centenarian incentiveNone5 minutes2. Receive SC cash incentive3.1 Distribute the cash grant thru door-to-door deliveryNone5 minutesMarishir M. Alamar Social Welfare Aide Brenda P. Pilar Social Welfare Aide Brenda P. Pilar Social Welfare Aide		narriage/baptismal (1	MCR/PS	SA				
CLIENT STEPSAGENCY ACTIONSFES TO BE PAIDPROCESSING TIMEPERSON RESPONSIBLE1. Submit requirements1.1 Check the completeness of the Requirements.None45 minutesServitas P. Romano Municipal Social Welfare and Development Officer1.2 Interview and verify the validity of the submitted requirementsNone45 minutesServitas P. Romano Municipal Social Welfare and Development Officer1.3 Facilitate and submit the documents to the concerned offices for the preparation of the Centenarian incentiveNone5 minutes2. Receive SC cash incentive3.1 Distribute the cash grant thru door-to-door deliveryNone5 minutes2. Receive SC cash incentive3.1 Distribute the cash grant thru door-to-door deliveryNone5 minutes4. Refere Aide Social Welfare Aide Brenda P. Pilar Social Welfare Aide Brenda P. Pilar Social Welfare Aide	3.Recent whole-bo	dy photo of the living	Studio of choice					
CLIENT STEPSAGENCY ACTIONSTO BE PAIDPROCESSING TIMEPERSON RESPONSIBLE1. Submit requirements1.1 Check the completeness of the Requirements.None45 minutesServitas P. Romano Municipal Social Welfare and Development1.2 Interview and verify the validity of the submitted requirements1.2 Interview and verify the validity of the submitted requirements45 minutesServitas P. Romano Municipal Social Welfare and Development Officer1.3 Facilitate and submit the documents to the concerned offices for the preparation of the Centenarian incentiveMary Jane Lacasandile Day Care Worker2. Receive SC cash incentive3.1 Distribute the cash grant thru door-to-door deliveryNone5 minutesMarishir M. Alamar Social Welfare Aide Brada Day Care F. Galzote Social Welfare Aide Brenda P. Pilar Social Welfare Aide	nonagenarian/cen	tenarian (1 pc)						
requirements       completeness of the Requirements.       Servitas P. Romano Municipal Social Welfare and Development Officer         1.2 Interview and verify the validity of the submitted requirements       Geraldine P. Bragado Social Welfare Assistant         1.3 Facilitate and submit the documents to the concerned offices for the preparation of the Centenarian incentive       Mary Jane Lacasandile Day Care Worker         2. Receive SC cash incentive       3.1 Distribute the cash grant thru door-to-door delivery       None       5 minutes         4. Raña Social Welfare Aide       Social Welfare Aide         4. Raña Social Welfare Aide       Helen Grace F. Galzote Social Welfare Aide	CLIENT STEPS	AGENCY ACTIONS	TO BE					
cash incentive       cash grant thru door-to-door delivery       Social Welfare Aide         Laila R. Raña Social Welfare Aide       Laila R. Raña Social Welfare Aide         Helen Grace F. Galzote Social Welfare Aide         Brenda P. Pilar Social Welfare Aide		completeness of the Requirements. 1.2 Interview and verify the validity of the submitted requirements 1.3 Facilitate and submit the documents to the concerned offices for the preparation of the Centenarian	None	45 minutes	Welfare and Development Officer Geraldine P. Bragado Social Welfare Assistant Mary Jane Lacasandile			
TOTAL None 50 minutes		cash grant thru door-to-door	None	5 minutes	Social Welfare Aide Helen Grace F. Galzote Social Welfare Aide			
	TOTAL		None	50 minutes				

#### **5. ISSUANCE OF CERTIFICATION**

The Municipal Social Welfare and Development Office had developed a network of referral system to other government and non-government agencies to link indigent individuals and families for various programs and services.

Office or Division:	Municipal Social Welfare and Development Office		
Classification:	Simple		
Type of	G2C – Government to Client		
Transaction:			
Who may avail:	Walk-in-Client		
CHECKLIST OF REQUI	IREMENTS WHERE TO SECURE		
1. Certification of Barangay		Barangay Where Client Resides	
Residenc	y (1 Original)		

<ol> <li>Birth Certificate (If there is minor involved) (1 Photocopy)</li> </ol>			PSA		
CL	IENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.	Submit the Requirements	<ul> <li>1.1 Check the completeness of the requirements.</li> <li>1.2 Interview the client, assess and facilitate the needed document</li> </ul>	None	2 minutes 30 minutes	Servitas P. Romano Municipal Social Welfare and Development Officer Geraldine P. Bragado Social Welfare Assistant
2.	Receive the signed certification	2.1 Release certification	None	2 minutes	
TO	TAL			34 Minutes	

# 6. ASSISTANCE ON SPECIAL CASES SUCH AS CHILDREN IN CRISIS IN CONFLICT WITH THE LAW (CICL) R.A. 9344, VICTIMS OF CHILD ABUSE (R.A. 7610), VICTIMS OF DOMESTIC VIOLENCE (R.A. 9262)

Provision of Special Protection Programs and Services to children in conflict with the law, victims of child abuse and victims of domestic violence.

Office or Division:		Municipal Social	cipal Social Welfare and Development Office			
Classification:		Simple to compl	ex			
Type of Transactio	on:	G2C – Governm	ent to Cit	izen/G2G-Goverr	nment to government	
Who may avail:		Children in confl	nflict with the law			
CHECKLIST OF REG	QUIREME	NTS	WHERE TO SECURE			
1. Child's pres	sence					
2. Guardian's	presenc	ce				
3. Referral Letter		PNP				
4. Barangay E investigatio		•	Barangay/ PNP			
5. Birth certific child's age		ny proof of the ocopy)	MCR			
6. Medical Ce	ertificate			Barangay Cap Station	tain/Municipal Police	
CLIENT STEPS	AGENC'	y actions	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	

1. Report	For CICL (RA 9344)			
the case to MSWDO	<ul> <li>1.1 Interview &amp; Assists client for possible custody (Affidavit of undertakings)</li> <li>1.3 Assessment on child functioning, formily functioning,</li> </ul>	None	2 hours 7 Days	Servitas P. Romano Municipal Social Welfare and Development Officer Geraldine P.
	family functioning, Index of value judgement and level of moral development 1.2 Prepare for a social Case Study Report on Discernment 1.3 Refer for Institutionalization (if needed)			Bragado Social Welfare Assistant
2. Minor attends	1.1 Conduct Diversion/	None	2 hours/session	Servitas P. Servitas P. Romano
Diversion / Intervent ion Program	Intervention Program 1.2 Supervise the implementation of the		6 months	Municipal Social Welfare and Development Officer
S	diversion/interve ntion program 2.3 Conduct home visit and follow-up cases		2 hours	Geraldine P. Bragado Social Welfare Assistant
3. Minor attends court hearing	3.1 Assist CICL to court hearings	None	1 hour	Servitas P. Romano Municipal Social Welfare and Development Officer
				Geraldine P. Bragado Social Welfare Assistant
	TOTAL	None	6 months, 7 Days, 7 hours	
1. Report the case to MSWDO	For Victims of Abuse (R.A. 7610) 1.1 Refer victim of child abuse to PNP Women's Desk for appropriate actions	None	30 minutes	Servitas P. Romano Municipal Social Welfare and Development Officer
	(legal)			Geraldine P. Bragado Social Welfare Assistant

	1.2 Assists the minor for first aide or physical examination (if needed)	None	30 minutes/ session	Servitas P. Romano Municipal Social Welfare and Development Officer Geraldine P.
2. Undergo counselling	2.1 Conduct counselling	None	1 hour	Bragado Social Welfare Assistant
	2.2 Turn-over minor to the parents/guardia n	None	30 minutes	
	Monitoring of the child	none	1 hour	
	TOTAL		3 Hours &	
			30 minutes	
1. Report abuse to MSWDO	For victims of Domestic Abuse (R.A. 9262) 1.1 Assists/refer victim to the PNP Women's Desk for appropriate actions (legal)	None	30 minutes	Servitas P. Romano Municipal Social Welfare and Development Officer
	1.2 Refer victims to the Municipal Health Office for assessment and management		30 minutes	Geraldine P. Bragado Social Welfare Assistant
	1.3 Provide counseling and home visitation services		30 minutes/ session	
	1.4 Assist for appropriate assistance (if needed)		5 minutes	
TOTAL			95 minutes	

#### 7. CONDUCT OF PRE-MARRIAGE ORIENTATION AND COUNSELLING

The Municipal Social Welfare and Development Office and other PMOC partners shall require all contracting parties or would-be-couples applying for a marriage license to

attend and participate in a Pre-Marriage Orientation and Counselling session before they are issued such license.

Office or Division:	Municipal Social V	Velfare ar	nd Developm	ent Office
Classification:	Simple			
Type of Transaction:	G2C – Governme	nt to Clier	nt	
Who may avail:	Walk-in Client			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. RHU signed Certificate of Compliance (1 Original)		RHU, PMOC Team members who conducted the session		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
Undergo Pre- Marriage Orientation	1.1Interview couple 2.1 Conduct Pre- Marriage Orientation	None	10 minutes 1 hour and 30 minutes	Servitas P. Romano Municipal Social Welfare and Development Office
1. Receive signed Pre-Marriage Certificate of Compliance3.1 Issue signed Certificate of Compliance		None	5 minutes	Servitas P. Romano Municipal Social Welfare and Development Office
TOTAL		None	1 hour and 45 minutes	

### **MUNICIPAL BUDGET OFFICE**

External and Internal Services

#### 1. PRELIMINARY REVIEW OF BARANGAY & SK ANNUAL/SUPPLEMENTAL BUDGETS

Within Ten (10) days from its approval, copies of the Barangay Appropriation ordinance authorizing the Annual/Supplemental Budget must be submitted to the Sagguniang Bayan for review through the Municipal Budget Officer to ensure that provision of RA7160, budgetary requirements, existing budgetary rules, and regulations as well as budget circulars and accounting parameters are complied with.

Office or Division:	Municipal Budget C	office			
Classification:	Complex				
Type of	G2C – Government to Client				
transaction:					
Who may avail:	The 15 Barangays of	f San Ildefonso			
CHECKLIST OF REQUIR		WHERE TO SE	CURE		
1. Transmittal Lett	er (1 original)	- Punong Barangay/SK Chairperson			
2. Budget Messag			ng Barangay/ SK		
3. Appropriation		- Barangay Council/ SK Officials			
original) 4. Budget Prepar original)	ation forms (1	<ul> <li>Barangay Treasurer, Barangay Secretary, Punong Barangay/ SK Treasurer, SK Secretary, SK Barangay</li> </ul>			
	arangay Youth n Plan ( 1 original)		gay Council		
6. GAD Plan With MLGOO(Baran original)	gay Only) ( 1	- DILG (			
7. Approved Ann	-	- Baran	gay Council		
	Only) ( 1 original)				
8. DRRM Plan (1		- Barangay Council			
9. SC and PWD A	ction Plan( 1	- Senior Citizen			
original)					
10. Program of Wo			eering Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Sign in the logbook & Submit Annual Budget	<ul> <li>1.1 Receive and record in the logbook</li> <li>1.2 Review submitted documents as to:</li> <li>a) Correct use of form</li> <li>b)Correct computation</li> <li>c) Correctness and</li> <li>completeness of data entries</li> <li>d)</li> <li>Completeness or required signatures</li> </ul>	None	1 minutes	Rogelio Raguindin Budgeting Assistant Zenaida G. Ricod Municipal Budget Officer	

	1.3 Transmit to the Sagguniang Bayan			
TOTAL		None	1 hour and 1 minute	

#### 2. ISSUANCE OF OBLIGATIONS REQUEST (ObR)

To Issue ObR as a Supporting document to all expenditures of the LGU as supported by Appropriation Ordinance

Office or Division:	Municipal Budget O	Municipal Budget Office			
Classification:	Complex	Complex			
Type of	G2C/G2B/G2G – Government to Client/Government to				
transaction:	Business/Government to Government				
Who may avail:	Different Offices of t	he Municipality	y of San Ildefonso	o, Ilocos Sur	
CHECKLIST OF REQUIR	EMENTS	WHERE TO SECURE			
<ol> <li>Purchase Order (2 Original)</li> <li>Purchase Request (2 Original)</li> <li>Perfected Contract (2 Original)</li> <li>Job Order (2 Original)</li> </ol>		<ul> <li>Concerned Office</li> <li>Concerned Office</li> <li>Contractor</li> <li>HRMO</li> </ul>			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Sign in the logbook and submit required documents	<ul><li>1.1 Record in the logbook</li><li>1.2 Prepare ObR</li><li>1.3 Record ObR</li></ul>	None	1 minutes 5 Minutes 2 Minutes	Rogelio Raguindin Budgeting Assistant Zenaida G. Ricod Municipal Budget Officer	
2. Receive the ObR	2.1 Issue ObR	None	2 minutes	Zenaida G. Ricod Municipal Budget Officer	
TOTAL		None	10 Minutes		

#### 3. RELEASING OF APPROVED ANNUAL AND SUPPLEMENTAL BUDGETS OF BARANGAY

To release all budgets of the 15 barangays reviewed by the Sangguiang Bayan

Office or Division:	Municipal Budget Office		
Classification:	Simple		
Type of	G2G - Government to Government		
transaction:			
Who may avail:	The 15 Barangays of San Ildefonso		
CHECKLIST OF REQU	CHECKLIST OF REQUIREMENTS WHERE TO SECURE		

None		None		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Receive and register in the logbook	1.1 Release approved annual/supplemental budgets	None	5 minutes	Rogelio Raguindin Budgeting Assistant Zenaida G. Ricod Municipal Budget Officer
TOTAL	1	None	5 Minutes	

#### 4. RELEASING OF APPROVED ANNUAL AND SUPPLEMENTAL BUDGETS OF

#### SANGGUNIANG KABATAAN

To release all budgets of the 15 barangays reviewed by the Sangguiang Bayan

Office or	Municipal Rudget Office				
	Municipal Budget Office				
Division:					
Classification:	Simple				
Type of	G2G - Government to Go	vernment			
transaction:					
Who may avail:	The 15 Barangays of San I	Idefonso			
CHECKLIST OF REQU	JIREMENTS	WHERE TO	SECURE		
None		None			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Receive and register in the logbook	1.1 Release approved annual/supplemental budgets	None	5 minutes	Rogelio Raguindin Budgeting Assistant Zenaida G. Ricod Municipal Budget Officer	
TOTAL		None	5 Minutes		

### HUMAN RESOURCES MANAGEMENT OFFICE

Internal Services

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#### **1. ISSUANCE OF CERTIFICATES**

The Human Resource Management Office is responsible in the issuance of Certificates of Leave Credits, Service Records, Certificate of Employment, and Acceptance of Retirement/ Resignation.

Office or Division:	Human Resources Management Office				
Classification:	Simple		~		
Type of transaction:	G2C – Government to				
Who may avail:	Current and Former Mu their beneficiaries/ nex	•	overnment emplo	oyee/s and/or	
<ul> <li>CHECKLIST OF REQUIREMENTS</li> <li><u>CERTIFICATE OF LEAVE CREDITS/SERVICE</u> <u>RECORD/CERTIFICATE OF EMPLOYMENT</u> <ul> <li>Accomplished Personnel Record Request Form</li> <li>Valid ID</li> </ul> </li> <li>For representatives:         <ul> <li>Accomplished Request Form</li> <li>Authorization letter</li> <li>Present ID or Photocopy of IDs of the (1) Requesting Person/Beneficiary and (2) the authorized person (if not employee)</li> </ul> </li> <li>For the beneficiaries:         <ul> <li>Birth Certificate</li> </ul> </li> </ul>		WHERE TO SECURE			
		<ul> <li>Human Resource Management Office (HRMO)</li> <li>Human Resource Management Office (HRMO)</li> <li>Requesting Person/ Beneficiary (plus requirement for beneficiary)</li> <li>Employer/other government agency issuing ID</li> <li>Philippine Statistics Office (PSA)</li> </ul>			
CLIENT STEPS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Accomplish forms and submit requirements</li> </ol>	<ul> <li>1.1 Check completeness and receive requirements</li> <li>1.2 Prepare, print document, and sign the document</li> </ul>	None	1 minute 4 minutes	Genesis Pisco HRMO Designate	
2. Receive Certificate	2.1 Release Certificate	None	1 minute	Genesis Pisco HRMO Designate	
TOTAL	1	None	6 minutes		
#### 2. ACCEPTANCE OF RESIGNATION/RETIREMENT

The Human Resource Management Office is responsible in accepting the resignation or retirement of current employees

Office or Division:	Human Resources Manage	ment Off	ice	
Classification:	Simple			
Type of transaction:	G2C – Government to Clier	nt		
Who may avail:	Current LGU employee and	l/or their	beneficiaries/ nex	t of kin
CHECKLIST OF REQUIREMEN	NTS	WHERE	TO SECURE	
Letter of intent to resign/ c	)r	Employ	ee	
Letter of intent to retire en Department Head	dorsed by concerned	Employ	ee	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit requirement/s	<ul> <li>1.1 Receive, record and review documents for appropriate action</li> <li>1.2 Prepare letter of acceptance of resignation/retirement and endorse to appointing authority</li> <li>1.3 Appointing authority to sign acceptance of resignation/retirement</li> </ul>	None	1 minute 4 minutes 1 minute	Genesis Pisco HRMO Designate Christian Daniel A. Purisima Mayor
2. Receive acceptance of resignation/retirement	2.1 Release acceptance of resignation/retirement letter	None	1 minute	Genesis Pisco HRMO Designate
TOTAL	·	None	6 minutes	

#### 3. LEAVE ADMINISTRATION

The Human Resource Management Office is responsible in the administration of leave credits of all municipal officials and employees in the Local Government Unit of San Ildefonso, Ilocos Sur.

Office or Division: Classification:	Human Resources Man	lageme			
	Simple G2G – Government to	Cover	mont		
Type of transaction: Who may avail:			es of the Municipal Government of San		
	Ildefonso, llocos sur	ployee			
CHECKLIST OF REQUIRE		WHER	E TO SECURE		
1. VACATION LEAVE (V					
SPECIAL LEAVE PRIVILEO					
OMNIBUS RULES IMPLEMENTING EO NO.292)			Human Pasauraa Managamant		
1.1. Application for Leave with		-	Human Resource Management Office (HRMO)		
-	ecommendation & signature of concerned Office Head (Civil Service Form No. 6)				
Additional Requiremen	t for VI without Pav				
for period exceeding 3					
	,				
2. EXPANDED MATERNIT	Y LEAVE (RA				
NO.11210/IRR ISSUED B					
2.1 Application for L					
recommendation & sig		-	Human Resource Management		
Office Head (Civil Servi	•		Office (HRMO)		
2.2 Medical Certific			Attending Dhysician (Lessited		
(Reflecting the expected	ed period of delivery)	-	Attending Physician/Hospital		
3. PARENTAL/ SOLO PAI	RENT LEAVE (RA NO				
8972/ CSC NO. 8 S 2004		-	Human Resource Management		
3.1 Application for			Office (HRMO)		
recommendation & sig					
Office Head					
3.2 Solo Parent ID					
(Present Origina	I & submit Photocopy)	-	Municipal Social Welfare		
			Development Office (MSWDO)		
4. PATERNITY LEAVE (RA NO. 71 S. 1998, AS AME			Human Resource Management		
4.1 Application for		-	Office (HRMO)		
recommendation & sig					
Office Head					
4.2 Medical Certifi	cate/ Proof of				
delivery/miscarriage of	-				
4.3 Photocopy of I	Marriage Certificate				
		-	Attending Physician/Hospital		
			Philipping Statistics Office (PSA)		
		-	Philippine Statistics Office (PSA)		
5. STUDY LEAVE (SEC.68	RULE XVI OMNIBUS				
RULES IMPLEMENTING E					
	<u>20</u>	1			

5.1 Mayor's Approval/ Memorandum— Authority to take a Study Leave - Mayor's Office	
Authority to take a Study Leave I - Mavor's Office	
(Pre-requisite: Request Letter endorsed	
by the concerned Office Head,	
addressed to the Mayor, through the	
HRMO) - Human Resource M	anaaement
5.2 Service Obligation Contract Office (HRMO)	6
5.3 Application for Leave with - Human Resource M	anagement
	unugemeni
recommendation & signature of concerned Office (HRMO)	
Office Head (Civil Service Form No. 6)	
6. REHABILITATION LEAVE (SEC. 55 RULE XVI,	
OMNIBUS RULES IMPLEMENTING EO NO. 292)	
6.1 Mayor's Approval - Mayor's Office	
(Pre-requisite: Request Letter endorsed	
by the concerned Office Head,	
addressed to the City Mayor, through	
the HRMO, sent within 1 week from	
occurrence of accident/ work-related	
	Polico/Notory
- Philippine National F	Police/ Notary
6.2 Incident Report/Police Report or Public	
Affidavit of Witnesses, whichever is	
applicable - Attending Physician	/ Hospital
6.3 Medical Certificate, specifying the	
following:	
<ul> <li>Nature of Injury</li> </ul>	
<ul> <li>Course of Treatment involved</li> </ul>	
<ul> <li>Need to undergo rest/</li> </ul>	
rehabilitation	
	a Covornmont
	Governmenn
rehabilitation Hospital	
6.4 If under a Private Attending	
Physician, needs Written Concurrence	
of Government Physician as to the - Human Resource M	anagement
duration of rehabilitation Office (HRMO)	
6.5 Application for Leave with	
recommendation & signature of concerned	
Office Head (Civil Service Form No. 6)	
7. MAGNA CARTA OF WOMEN (RA NO. 9262/	
<u>CSC MC NO. 15 S. 2005)</u>	
7.1 Request Letter endorsed by the - Client	
concerned Office Head, addressed	
to the Municipal Mayor, through the	
HRMO	
7.2 Application for Leave with - Human Resource M	anagement
recommendation & signature of concerned Office (HRMO)	
Office Head (Civil Service Form No. 6)	
7.3 Medical Certificate,	
with the following: - Attending Physician	l
<ul> <li>Clinical Summary reflecting the</li> </ul>	
gynecological disorder	
<ul> <li>Histopathological report</li> </ul>	
<ul> <li>The duration of the surgery</li> </ul>	
including pro operative period	
including pre-operative period (confinement before surgery)	

recovery	od of recuperation/			
WOMEN AND CHILDR MC NO. 15 S. 2005) 8.1 Applicati recommendation & s Office Head (Civil Ser o Certifice Barang or Prose that an	ation obtained from the ay Captain/ Kagawad cutor or Clerk of Court action based on has been filed and is	- Human Resource Management Office (HRMO)		
<ul> <li>9. 5-DAY SPECIAL EN</li> <li>MC No. 2 s 2012, as</li> <li>(Granted to governia affected by natural 9.1 Application 18</li> <li>recommendation &amp; concerned Office H</li> <li>No. 6)</li> <li>9.2 Certification</li> <li>Head of Office that</li> <li>were undertaken: vere employee's eligibility</li> <li>including:</li> <li>(1) validation of place</li> <li>on latest available re</li> <li>employee; (2) verifice</li> </ul>	ERGENCY LEAVE (CSC camended) nent employees calamities/ disasters) or Leave with signature of ead (Civil Service Form from the concerned the following actions erification of to be granted of SEL, ce of residence based ecords of affected tation that the place red in the declaration (3) such other proofs	Offic	an Resource Mar e (HRMO) d of office of the	C
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Accomplish Personnel Request Form (PRRF)	1.1 Check completeness and receive requirements 1.2 Review, fill out, and sign the certification of leave credits	None	5 minutes 5 minutes	Genesis P. Pisco HRMO Designate

	certification of leave credits portion 1.3 Forward to the Municipal Mayor's Office for approval 1.4 Approve leave application	None	5 minutes 1 minute	Christian Daniel "Basi" A. Purisima Municipal Mayor
2. Receive approved Leave Application	2.1 Release approved leave applications	None	1 minute	Genesis P. Pisco HRMO Designate

TOTAL		17 Minutes	

#### 4. RECEIVING OF JOB APPLICATIONS (EXTERNAL APPLICATION)

The Human Resource Management Office is responsible in the receiving job applications of all qualified job applicants.

Office or Division:	Human Resources N	Aanagement C	Office	
Classification:	Simple			
Type of transaction:	G2C – Government	to Client		
Who may avail:	All qualified applica	ants		
CHECKLIST OF REQUIREMEN	TS	WHERE TO SE	CURE	
<ul> <li>Application/ Cover copy)</li> <li>Duly Accomplished Sheet (PDS), with att Experience Sheet (V under Item-V, and n (1 original copy)</li> <li>Performance rating period (if applicable</li> <li>Photocopy of Transc</li> <li>Photocopy of Certifi Rating/ License</li> </ul>	Personal Data tached Work VES) as required nost recent photo in the last rating e) (1 original copy) cript of Records	<ul> <li>Applicant</li> <li>Downloadable from the Civil Service (CS Form No. 212- Revised 2017)</li> <li>Agency/Office where the applicant works/worked.</li> <li>School where the applicant has attended/ graduated</li> <li>CSC/ PRC/ SC</li> </ul>		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit requirements	<ul> <li>1.1 Check completeness and receive requirements</li> <li>1.2 Inform the applicant on the process of hiring and that he/she will be updated on the assessment results.</li> </ul>	None	5 minutes	Genesis P. Pisco HRMO Designate
TOTAL		None	10 minutes	

# PUBLIC EMPLOYMENT SERVICE OFFICE

**External Services** 

### 1. ISSUANCE OF MAYOR'S CERTIFICATION (FOR EMPLOYMENT)

Issuance of Mayor's Certification and Skills registration serves as the primary tool of PESO in conducting in skills inventory of employed residents of San Ildefonso, Ilocos Sur

Office or Division	or Division Public Employment Service Office				
Classification:	Simple				
Type of	G2C - Government to Cit	izer	n		
Transaction:	G2C - Government to Chizen				
Who may avail:	All Employee/Jobseeker	in S	an Ildefons	o, llocos Sur Resi	dents
CHECKLIST OF REQU	JIREMENTS		WHERE TO	SECURE	
Certificate	copy of Community Tax	•	Barangay, Barangay Client	/Municipal Treasu	urer's Office
Request Letter					<b></b>
CLIENT STEPS	AGENCY ACTION		FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
<ol> <li>Fill out and submit prescribed forms/ requirements</li> </ol>	<ul> <li>1.1 Review the completeness of information/documents</li> <li>1.2 Encode the Information to PEIS (Public Employment Inventory System) Online database</li> <li>1.3 Issue order payment (as needed) NOTE: For first time jobseekers, FREE of charge</li> </ul>		None	1 minute 5 minutes	Genesis P. Pisco Designate PESO Manager
2. Present Official Receipt	2.1 Encode the details needed 2.2. Forward to the Mayor's Office for approval		None	5 minutes 4 minutes	Genesis P. Pisco Designate PESO Manager Christian Daniel A. Purisima Municipal Mayor
3. Answer the Client Satisfaction Survey Form and Receive document	3.1 Release the signed document		None	1 minute	Genesis P. Pisco Designate PESO Manager
TOTAL			Refer to Revenue Code	16 minutes	

#### 2. SPECIAL RECRUITMENT ACTIVITY AND LOCAL RECRUITMENT ACTIVITY

Provide assistance to Overseas Placement Agencies, Local establishments, subcontractor agencies, or companies in conducting special recruitment/local recruitment activity

Office or Division	Public Employment Service Office				
Classification:	Simple				
Type of Transaction:	G2B - Government to	Business			
Who may avail:	All Companies				
CHECKLIST OF REQUIREM	<b>AENTS</b>	WHERE TO S	ECURE		
Local Recruitment Activ -Business Permit -Company Profile -Job Vacancy -Company Profile -Company TIN#	rity: (1, Photocopy)	Business Permit and Licensing Office, BIR Client Client Client Client			
-Letter of Intent (	1, Original)	Client			
Special Recruitment Ac -Business Permit -Company Profile -Job Vacancy -Company Profile -Company TIN# -Letter of Intent -POEA License -Approved job Order fro -PERMIT from POEA to c (1 original)	(1, Photocopy)	SEC, POEA, Business Permit and Licensing Office Client Client Client Client POEA POEA			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON	
1.Submit or Send the letter of intent and requirements	<ul> <li>1.1 Perform job matching on employee profile database based on education, skills and working experience</li> <li>1.2 Invite potential qualified jobseeker thru text to come for exam or interview to be conducted</li> </ul>	None	10 minutes 3 minutes	<b>RESPONSIBLE</b> Genesis P. Pisco Designate PESO Manager	

	(Local or Overseas)			
2. Conduct Recruitment Activity	2.1 Assist the Employer and Applicants	None	8 Hours	Genesis P. Pisco Designate PESO Manager
TOTAL		NONE	8 HOURS AND 13 MINUTES	

#### 3. JOB FAIR

Jobs Fair is an employment facilitation strategy aimed to fast-track the meeting of jobseekers and employers/overseas recruitment agencies in one venue at a specific date to reduce cost, time, and effort particularly on the part of the applicants. This is open to all unemployed, skilled, and unskilled workers, fresh college graduates, graduates of training institutions, displaced workers and employees seeking advancement. During the Jobs Fair, applicants select vacancies suited to their qualifications and employers could interview and hire on the spot qualified workers to provide assistance to Overseas Placement Agencies, Local establishments, sub-contractor agencies, or companies.

Office or Division	Public Employment Service Office					
Classification:	Simple	Simple				
Type of Transaction:	G2B – Government to Business					
Who may avail:	All Company					
CHECKLIST OF REQUIREM	<b>NENTS</b>	WHERE TO S	SECURE			
of the PESO 2. Company Profile 3. Photocopy of BIR Registration 4. Photocopy of Lat 5. Photocopy of SEC 6. Photocopy of Phi 7. List of Vacancies with number of vac place of assignmen 8. Photocopy of Co 9. Photocopy of Co 9. Photocopy of Co Certificate 10. Company officio complete details ar 11. Photocopy of Do agencies only) A. DO 18-A/PRPA	est Business Permit C/DTI registration Uob Net Certificate with Qualifications ancy per position and t mpany SSS Certificate mpany PhilHealth al contact person with nd position OLE Certificates (For No Pending Case ent List compliance	Business Per Departmen Public Emp Client Social Secu Local Heal Client Departmen Departmen Company	nternal Revenue ermit Licensing Off at of Trade and In- oloyment Informat urity Services th Insurance Offic ant of Labor and Er ant of Labor and Er	dustry ion System (PEIS) e nployment nployment		
CLIENT STEPS	AGENCY ACTION	FEES TOPROCESSINGPERSONBE PAIDTIMERESPONSIBLE				
1. Submit requirements	1.1 Evaluate the completeness and authenticity of the requirements	None	2 minutes	Genesis P. Pisco Designate PESO Manager		

1.2 Notify the company on the approval of the Recruitment Activity	None	3 minutes	
1.3 Perform job matching on employee profile database based on education, skills and working experience	None	10 minutes	Genesis P. Pisco Designate PESO Manager
1.4 Invite potential qualified jobseeker thru text to come for exam or interview to be conducted by hiring agency (Local or Overseas	None		

### 4. JOB POSTING

This is a process wherein it encourages employers to submit to the PESO on a regular basis a list of job vacancies in their respective establishments in order to facilitate the exchange of labor market information services to job seekers and employers by providing employment services to job seeker, both for local and overseas employment, and recruitment assistance to employers

Office or Division	Public Employment Service Office
Classification:	Simple
Type of Transaction:	G2B - Government to Business
Who may avail:	All Company

CHECKLIST OF REQUI	REMENTS		WHERE TO SECURE
Local Company			
-Business Permit	-	B∪s	iness Permit and Licensing Office,
-Company Profile		BIR	
-Job Vacancy	(1, Photocopy	) Clie	ent
-Company Profile		Clie	ent
-Company TIN#		Clie	ent
-Letter of Intent	(1, Original)	BIR	
		Clie	ent
Overseas Company			
-Business Permit			
-Company Profile		SEC	C, POEA, Business Permit and
-Job Vacancy		Lice	ensing
		Off	ice

-Company -Company TIN# -Letter of Intent -POEA License -Approved job -PERMIT from recruitment (1	_		Client Client BIR Client POEA POEA	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the letter of intent and requirements	1. 1Evaluate the completeness and authenticity of the submitted requirements 1.2 Encode and lay out the vacancy details	None	1 minute	Genesis P. Pisco Designate PESO Manager
2. Check the job	3. Post the Job	None	5 minutes	

Genesis P. Pisco

Designate

PESO Manager

Vacancies on

the PESO

the PESO bulletin board

for

Facebook

Page and on

dissemination

TOTAL:

NONE

**16 MINUTES** 

posted in

account

PhilJob.net and

**PESO Facebook** 

# 5. TULONG PANGHANAP BUHAY SA ATING DISADVANTAGE/DISPLACE WORKER

Emergency Employment Program or Tulong panghanap buhay sa ating Disadvantaged/Displaced Worker (TUPAD) is a community-based (municipality/barangay) package of assistance that provides emergency employment for displaced workers, underemployed and seasonal workers, for a minimum period of 10 days, but not exceed a maximum of 30 days, depending on the nature of work to be performed.

Office or Division	Public Employment Service Office					
Classification:	Complex					
Type of Transaction:	G2C – Government to Citizen G2G - Government to Government					
Who may avail:	Resident of San Ildefonso	Resident of San Ildefonso				
CHECKLIST OF	REQUIREMENTS		WHERE TO SECU	JRE		
<ul> <li>2pcs 1x1 picture</li> <li>One (1) Original copy of Cedula</li> <li>One (1) Valid Identification</li> </ul>		<ul> <li>Client/Photo Studio</li> <li>Respective Barangay/Treasury Office</li> <li>Client</li> </ul>				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E		
1. Submit requirements and fill up TUPAD Forms at Public Employment	<ul> <li>1.1 Evaluate, Profiling and interview of the beneficiaries</li> <li>1.2 Encode and Register to GSIS</li> </ul>	None	10 minutes	Genesis P. Pisco Designate PESO		
Service Office	1.3 Submit the list of beneficiaries to the Department of Labor and Employment		2 minutes 30 minutes	Manager		
2. Attend Orientation	(DOLE) 2.1Conduct orientation and Signing of	None	4 hours	Genesis P. Pisco		
	Contract 2.2 Distribute Uniform	None	5 minutes	Designate PESO Manager		
	and tools (if there is any) 2.3 Prepare work assignment for various TUPAD workers and Coordinate with the Barangay.	None	1 day	Barangay Officials		
3. Report to designated workplace and abide by the rules and regulation of LGU/ Barangays where assigned	3.1. Monitor activity and attendance of beneficiary	None	Minimum of 10 days – Maximum 52 days	Genesis P. Pisco Designate PESO Manager		

4. Submit Daily Time Record (DTR) and Accomplishment Report	<ul> <li>4.1. Acknowledge the receipt of the submitted DTR and Accomplishment Report for Payroll</li> <li>4.2 Collate and submit the DTR and Accomplishment Report to the Department of Labor And Employment</li> </ul>	None	3 minutes 10 minutes	Genesis P. Pisco Designate PESO Manager
6. Receive salary and sign payroll	6. Distribute salary	None	3 minutes	Genesis P. Pisco Designate PESO Manager DOLE Personnel
	TOTAL	None	PACOMPUTE	

# 6. CAREER GUIDANCE/LEGS LABOR EDUCATION FOR GRADUATING STUDENTS/PRE-EMPLOYMENT ORIENTATION

Career Guidance advocacy was implemented to help our students to have proper career planning and preference based on their skills and interest, while labor education is a program to help graduating students to become familiar with PESO and DOLE services on employment facilitation, worker's protection and social security coverage in order for these soon-to-be employees to come prepared for the world of work.

Office or Division	Public Employment Service Office					
Classification:	Simple	Simple				
Type of Transaction:	G2G - Government to Government G2B- Government to Business					
	G2C Government to Cli					
Who may avail:	All interested individual	s				
CHECKLIST OF REQUIRE	MENTS	WHERE TO	SECURE			
Request Letter (1, Origir	nal) Requesting School/Government Agency/Businesses/Client			nment		
CLIENT STEPS	AGENCY ACTION	FEES TO	PROCESSING	PERSON		
		BE PAID	TIME	RESPONSIBLE		
1. Submit the request letter to the Mayor's Office	2.1 Acknowledge the receipt of the letter request	None	3 minutes	Genesis P. Pisco Designate PESO		
	2.2 Evaluate the request and schedule.	None	5 minutes	Manager		
2. Prepare the venue for the conduct of the request	3.1 Inform the client on the status of the request	None	3 minutes 4 Hours	Genesis P. Pisco Designate		

	3.2 Conduct of Career Guidance/PEOS Seminar			PESO Manager
TOTAL:		NONE	4 HOURS AND 11 MINUTES	

#### 7. ISSUANCE OF REFERRAL LETTER

The term referral letter is used to describe a document sent to an employer that outlines the observed skills and work experience of a candidate. Referral letters are written recommendation from the office endorsing the jobseeker for possible employment.

Office or Division	Public Employment Service Office			
Classification:	Simple			
Type of Transaction:	G2C - Government t	o Citizen		
Who may avail:	All Jobseeker Residents of San Ildefonso, Ilocos Sur			Jr
CHECKLIST OF REQUIREM	<b>NENTS</b>	WHERE TO S	ECURE	
Request slip (1, Original	)	Job seeker		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the Request Slip and submit to the PESO staff	<ul> <li>1.1 Review the completeness of Information and evaluate the applicants' credentials.</li> <li>1.2 Prepare the referral letter and print</li> </ul>	None	1 minutes 4 minutes	Genesis P. Pisco Designate PESO Manager
2 Receive the referral letter	2.1 Release the referral letter	None	1 minute	Genesis P. Pisco Designate PESO Manager
	TOTAL:	NONE	6 MINUTES	

#### 8. CONDUCT OF SKILLS TRAINING

Undertake employability enhancement trainings for jobseekers, OSY and other marginalized sectors as well as those who would like to change career or enhance their employability. This function is presently supervised by TESDA and conducted by other training;

Office or Division	Public Employment Service Office					
Classification:	Complex					
Type of Transaction:	G2C – Government to			Government		
Who may avail:	Residents of San Ildefo					
CHECKLIST OF REQUIRE	MENTS	WHERE TO SE	CURE			
- Letter of Intent		Job seekers		-		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1. Submit letter of intent	1.1 check if the requirements are complete	None	3 minutes			
	1.2 Collate all interested applicants	None	15 minutes			
	1.3 Prepare the final list of applicants that will undergo skills training	None	5 minutes	Genesis P. Pisco Designate PESO Manager		
	1.4 Submit the final list of applicants that will undergo skills training to the Technical Education and Skills Development Authority (TESDA)	None	1 hour	Manager		
2. Attend the schedule of orientation and Skills Training	<ul> <li>2.1 Shortlisting of participants</li> <li>2.2 Inform the applicants on the qualification and schedule of orientation</li> <li>2.3 Facilitate the conduct of skills training</li> </ul>	None	3 minutes 5 minutes/per applicant 8 hours	Genesis P. Pisco Designate PESO Manager and TESDA		
	TOTAL:	NONE	8 hours and 31 minutes			

# OFFICE OF THE MUNICIPAL CIVIL REGISTRAR

**External Services** 

### 1. **REGISTRATION OF BIRTH CERTIFICATE**

Incidents of Birth occurring in the Municipality must be recorded with the office of the Municipal Civil Registrar within thirty (30) days from birth

Office or Division:	Local Civil Registry Office				
Classification:	Simple	7			
Type of Transaction:	G2C-Governmer	nt to Client			
Who may Avail:	<b>Rural Health Unit</b>	Personnel/ Po	arents of the Ch	nild	
CHECKLIST OF REQU	JIREMENTS		WHERE TO SEC	URE	
Accomplished Municipal Fo	orm 102	Rural Health	Unit/Municipal C	Civil registrar's	
(certificate of Live Birth) 4 c		Office			
Affidavit to use the surname	-	Notary public			
parents are not yet married					
Certified photo copy of mc		Registrar	tistics Authority/	Local Civil	
Negative Certification of bi			tistics Authority		
Affidavit of two disinterester	d person	Notary Public			
Baptismal Certificate		Parish rectory			
School records		School autho	prity		
Any other documents show date and place of birth of t		Government	agencies		
(marriage, voter's certificat		Governmenn	ugencies		
	AGENCY	FEES TO BE	PROCESSIN	PERSON	
CLIENT STEPS	ACTION	PAID	G TIME	RESPONSIBLE	
<ol> <li>Submit duly filled out Municipal Form 102 four (4) copies.</li> </ol>	<ul> <li>1.1 Receive and review the document;</li> <li>1.2 Assign Registry Number, type the date of registration, and sign;</li> <li>1.3 Transcribe in the registry Book;</li> <li>1.4 Encode in the Philippine Civil Registry Information System (PhilCRis)</li> </ul>	Free Registratio n (National State Policy) Iate registration *Php 500.00 *Php 50.00 per copy of birth form *Php 300. 00 affidavit of birth *Php 100.00 endorsem ent * Php 300.00 processing fee	5 minutes 5 minutes 10 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)	

2. Receive copy of the Rural Health Unit and document owner's copy	2.a Release the copy of the birth Certificate to the Rural Health Unit's and the parents	2 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
Total		32 minutes	

### 2. **REGISTRATION OF DEATH CERTIFICATE**

Incidents of Death occurring in the Municipality must be recorded with the office of the Municipal Civil Registrar within thirty (30) days from death by the nearest kin of the deceased.

Office or Division:	Loca	l Civil Regist	ry Office		
Classification:	Simp	le	•		
Type of Transaction:	Gove	ernment to C	Client		
Who may Avail:	The n	earest kin o	f the decease	ed	
CHECKLIST OF REQU	JIREMI	ENTS		WHERE TO SE	CURE
Accomplished Municipal Fo (certificate of Death) 4 cop			Rural Health (	Jnit	
Negative Certification of d	eath		Philippine sta	tistics Authorit	V
Affidavit of two disintereste		on	Notary Public		/
Baptismal Certificate			Parish rectory	/	
School records			School autho	ority	
Authenticated copy of bur other means of corpse disp		mation or			
CLIENT STEPS		GENCY CTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Submit duly filled out form 103 four (4) copies.	26.2 26.2 26.2	Receive the docume nt; Assign registry number, type the date of registrati on, and sign; transcrib e in the registry book and encode	Free Registratio n (National State Policy) Iate registration *Php 500.00 *Php 50.00 certificate of death per copy *Php 100.00 endorsem ent letter *Php 200.00	5 minutes 5 minutes 10 minutes 1 minute	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)

	in the PhilCris; 26.2 Issue order of payment for the burial permit and the transfer of cadaver if he/she came from other municipa lity or city	affidavit of death		
2. Show the official receipt and receive the document	3.1 Receive the official receipt; 3.2 Record the burial permit, release the		1 minute 4 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
Total	document and official receipt.		26 minutes	

### 3. **REGISTRATION OF MARRIAGE CERTIFICATE**

Marriage occurring in the Municipality must be recorded with the office of the Municipal Civil Registrar with in thirty (30) days from Marriage.

Office or Division:	Local Civil Registry Office				
Classification:	Simple				
Type of Transaction:	Government to (	Client			
Who may Avail:	The record keeper or representative of the solemnizing officer				
CHECKLIST OF REQ	QUIREMENTS WHERE TO SECURE				
Accomplished Municipal 97(certificate of Marriage original					
Affidavit of two disinterest	ested person Notary Public				
Negative certification of r	narriage Philippine Statistics Authority				
Affidavit of the solemnizin	g officer	Notary Public			

Affidavit of the Contractin their names and place of	• •	Notary Publi	С	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESS ING TIME	PERSON RESPONSIBLE
<ol> <li>Submit the duly filled out Municipal Form 97 four (4) copies</li> </ol>	<ul> <li>1.1 Receive and review the document;</li> <li>1.2 Assign a Registry number, type the date of registration and sign;</li> <li>1.3 Transcribe in the registry book and encodes in the PhilCris</li> </ul>	Free Registratio n (National State Policy) <b>late</b> registratio n *Php 500.00 *Php 100.00 endorsem ent of marriage *Php 50.00 per copy of marriage certificate *Php 300.00 Affidavit of marriage *Php 300 processin g fee	5 minutes 5 minutes 20 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
2. Receive the document.	2.1 Release the client copy and the contracting parties copy.	None	3 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
Total	•		33 minutes	

## 4. ISSUANCE OF CERTIFICATIONS (BIRTH, DEATH AND MARRIAGE)

Incidents of Birth, death and marriage occurring within the municipality must be duly registered at the Municipal Civil Registrar's office, copies of which may be obtained for record and authentication purposes, for personal, local or abroad use.

Office or Division:	Local Civil Regist	ry Office			
Classification:	Simple				
Type of Transaction:	Government to C	Government to Client			
Who may Avail:	Document owner	and the neares	st kin for the d	eath certificate	
CHECKLIST OF REG	UIREMENTS		WHERE TO SE	CURE	
1 (one) Valid ID		Office conce	erned		
Authorization letter for in the document owner	ne absence of the	Owner of the	document		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
1. Fill-up request slip	<ol> <li>a Receive slip duly filled-up or interview client;</li> <li>b Verify the availability of the records in the PhilCris or Registry</li> </ol>	None	1 minute 4 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)	
	book; 1.c Issue order of payment		1 minute		
<ol> <li>Present the official receipt.</li> </ol>	3.1 Receive the official receipt and print and sign the certification ;	Certificatio n for local and abroad Php 100.00 document ary stamp Php 30.00	5 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)	
3. Receive the requested document.	2. Release the document.	None	1 minute	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)	
Total			12 minutes		

### 5. APPLICATION FOR MARRIAGE LICENSE

Couple intending to enter the marital bliss has to secure first a marriage license before contracting marriage

Office or Division:	Local Civil Regis	strv Office		
Classification:	Simple			
Type of Transaction:	Government to	Client		
Who may Avail:	Couple of Legal Municipality	of Legal Age and at least one is a resident of the pality		
CHECKLIST OF REQU	JIREMENTS		WHERE TO SE	
Birth certificate (2 photo co	opies)	Municipal civ Statistics Auth		ffice/Philippine
Parental consent (for ages parent advice (for ages 22	,	Municipal Ci	vil Registrar's O	ffice
Certificate of no Marriage photo copies)	(CENOMAR) (2	Philippine Sto	atistics Authority	1
Family planning seminar/ p counselling seminar	pre marriage	POPCOM an	d DSWD	
Barangay Residency/ ID w	ith residence	Barangay		
Death Certificate of deced Judicial Decree of annulm marriage (if previously mar	ent or nullity of	Court Author	ity	
Certificate of legal Capac	ity (if foreigner)		onsulate in the	Philippines
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
<ol> <li>Present requirements and fill up the application form.</li> </ol>	<ul> <li>1.1 Check on the correctness of the documents presented.</li> <li>1.2 Prepare the parental consent/ parental advice if needed</li> <li>1.3 Issue order of payment</li> </ul>	*Php 1,000.00 = Applicatio n fee *Php 50.00 applicatio n of marriage license per copy *Php. 300.00 processing fee * Php 100.00 parent consent/ advice Php 2.00 marriage license	5 minutes 10 minutes 1 minute	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
2. Show the official receipt and proceed to the Rural Health Unit for counselling	3. Receive the official receipt;	none	1 minute	Priscilla Purisima Municipal Civil Registrar
3. Submit certificate of counselling and sign	3.1 Receive the	none	1 minute	Priscilla Purisima

the application for marriage license form.	Certificate Of Compliance ;		15 minutes	Municipal Civil Registrar
	3.2 Prepare and sign the application form;		2 minutes	
	5. Return the official receipt and advised the applicants to return after 10 days of posting period to accept the marriage license.			
4. Receive the marriage license	4.1 Release the marriage license	Php 2.00	2 minutes	
Total	1		37 min utes	

# 6. PETITION FOR CHANGE OF FIRST NAME OR NICKNAME

R.A. 9048 authorizes the Municipal Civil Registrar to effect the change in the first name or nickname and correct clerical or typographical error without need of a judicial order, except the nationality, age and status which can only be affected by court order.

Office or Division:	Local Civil Registry Office				
Classification:	Simple				
Type of Transaction:	Government to C	lient			
Who may Avail:	All residents born in the municipality of San Ildefonso, Ilocos Sur				
CHECKLIST OF REQ	UIREMENTS	WHERE TO SECURE			
Certificate of Live Birth cor entry from Philippine Statist original copies	5 S				
Certificate of baptism (2 p	hoto copies)	Parish rectory			
Voter's Certificate (2 photo	o copies)	COMLEC			
School record (form 137, diploma) (2 photo copies)		School Authority			
Marriage certificate (2 pho	e (2 photo copies) Philippine Statistics Authority/Municipal Civi registrar Office				

Birth certificate of children (if available 2 photo copies)		Philippine Statistics Authority/Municipal Civil registrar office			
Any other document that proves the first name such as old ID's, driver's license, SSS, GSIS, Insurance, Passbooks, service records, school records, appointment, etc. (2 photo copies)		Government agencies			
Police clearance (2 photo		PNP station			
NBI clearance (2 photo co		NBI Office	•		
Employer's clearance (if e	· · ·	Employer's	agency		
Affidavit of non-employme employed)		Notary Pub			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1. Submit requirements	<ul> <li>1.1 Receive and review the documents;</li> <li>1.2 Provide the petition form (R.A. 9048 Form No. 41) to be sign by petitioner;</li> <li>1.3 Issue order of</li> </ul>	*Php 3,000.00= filling fee *Php 300.00 + service fee	20 minutes 15 minutes 1 minute	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)	
2. Submit the official receipt and sign the prepared petition	3.1 Receive the official receipt; 2.2 Prepare notice of posting and post to the LCR Bulletin; issue notice of publication to the petitioner	none	1 minute 3 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)	
3. Submit the notice of publication to newspaper publisher to publish petition			2 consecutiv e weeks	Newspaper publisher	
<ul> <li>4. Submit Affidavit of publication and copy of newspaper clippings to the LCR once the publication is completed</li> </ul>	5.1 Receive the newspaper clippings and affidavit of publication and decide merit of petition within 5 days and transmit the petition & supporting evidence to the Philippine		15 minutes 5 days	Priscilla Purisima Municipal Civil Registrar	

	Statistics Authority Legal Department for affirmation of MCR approval petition. 5.2 The petitioner will be contacted once the petition is affirmed and ready for issuance at the PSA		
Total		5 days and 55 minutes	

# 7. PETITION FOR CORRECTION OF CLERICAL ERROR OR TYPOGRAPHICAL ERROR (R.A. 9048)

R.A. 9048 authorizes Municipal Civil Registrar to effect in the correction of clerical error or typographical error without need of a judicial order, except as the nationality, age and status of the applicant as appearing in his/her birth certificate, which can only be affected by the court.

Office or Division:	Local Civil Registry Office				
Classification:	Simple				
Type of Transaction:	Government to Client				
Who may Avail:	All residents in the	e municipali	ity of San Ildefo	onso, llocos Sur	
CHECKLIST OF REQU	JIREMENTS		WHERE TO SE	CURE	
Security paper (SECPA) of t containing wrong entry	he documents	Philippine Statistics Authority		ý	
Baptismal Certificate		Parish recto	ry		
Birth Certificate of husband marriage petition)	/ wife (for	Philippine Statistics Authority			
Voter's Certificate		Comelec			
Any other documents that entry such as old ID's, GSIS, SSS, Insurance, passbooks, s appointments, etc. (2 phot	Driver's license, service records,	Government Agencies			
CLIENT STEPS	AGENCY ACTION	FEES TOPROCESSINPERSONBE PAIDG TIMERESPONSIBLE			

1. Submit requirements	<ul> <li>1.a Receive and review the document;</li> <li>1.b Provide the petition form (R.A. 9048 For No. 1.1) to the client and prepare the notice of posting and post on the MCR bulletin board for 10 days;</li> <li>1.c Issue order of payment upon receipt of the accomplishe d petition form</li> </ul>	*Php 1,0000- filling fee *Php 300.00 =service fee	20 minutes 15 minutes 10 days 1 minute	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
2. Submit the official receipt and sign the prepared petition.	<ul> <li>3.1 Receive the official receipt and transmit the petition and supporting evidence to the Philippine Statistics Authority Legal Department for affirmation of MCR approval petition;</li> <li>3.2 The petitioner will be contacted once the petition is affirmed and ready for the issuance at the PSA.</li> </ul>	none	15 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
Total			10 days and 51 minutes	

### 8. AFFIDAVIT TO USE THE SURNAME OF THE FATHER (R.A. 9255)

Illegitimate children allowed to use the surname of their father upon due application and filling of required documents with the Local Civil registrar

Office or Division:	Local Civil Regist	ry Office		
Classification:	Simple			
Type of Transaction:		Government to Client		
Who may Avail:	All residents			
CHECKLIST OF REQU			WHERE TO SE	CURE
Certificate of Live Birth (orig		Philippine St	atistics Authori	
Community Tax Certificate			easury office	
Valid ID's (2 photo copies)		Governmen		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Submit requirements.	<ul> <li>1.1 Receive and review the documents</li> <li>1.2 Prepare affidavit to use the surname of the father; annotated certifications and assigned registry number and date of registration;</li> </ul>	*Php 500 AUSF fee	20 minutes 20 minutes 5 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
	<ul> <li>1.3 Record in the register of legal instrument;</li> <li>1.e Issue order of payment</li> </ul>		1 minutes	
2. Present the Official receipt and receive the documents	2. Receive the official receipt and Release the document	None	5 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
Total			51 minutes	

# 9. PETITION FOR CORRECTION OF CLERICAL OR TYPOGRAPHICAL ERROR- SEX, DATE AND MONTH OF BIRTH (R.A. 10172)

R.A. 10172 Authorizes the Municipal Civil Registrar to effect and correct clerical or typographical error without need of a judicial order, except as the nationality, age and status of the applicant as appearing in his birth certificate, which can only be effected by court order.

Office or Division:	ce or Division: Local Civil Registry Office				
Classification:	Simple				
Type of Transaction:	Government to Client				
Who may Avail:	All residents born in the municipality of San Ildefonso, Ilocos Sur				
CHECKLIST OF REQU			WHERE TO SE	CURE	
Certificate of Live Birth con entry ( 2 copies original)		Philippine Statistics Authority			
Local copy of birth certifica	ate	Municipal Ci	ivil Registrar		
Certificate of baptism (2 pt	noto copies)	Parish rector	Ϋ́		
Earliest school record (form copies)	137) (2 photo	School autho	ority		
Medical record (check-up) copies)	) (2 photo	Hospital auth	nority		
Voter's registration record	(2 photo copies)	COMELEC			
Marriage certificate(2 phot	to copies)	Philippine Sto registrar's of		y/ Municipal civil	
Birth certificate of children	(2 photo copies)	Philippine Statistics Authority/ Municipal civil registrar's office			
NBI Clearance (2 photo co	pies)	NBI office			
Police Clearance (2 photo	copies)	Police Office			
Employer's clearance (if ap	oplicable)	employer			
Affidavit of non-employme employed)	nt (if not	Notary public			
Medical from rural health u	init	Rural Health Unit-San Ildefonso, Ilocos Sur			
Certificate of Authenticity		Rural Health Unit-San Ildefonso, Ilocos Sur			
Any other documents that proves the sex, day and moth of birth such as old ID's, driver's license, SSS, insurance, passbook, service record, appointment, etc. (2 photo copies)		Government agencies			
CLIENT STEPS	AGENCY ACTION	FEES TO PROCESSI PERSON BE PAID NG TIME RESPONSIBL			
1. Submit requirements	<ul> <li>1.1 Receive and review the documents;</li> <li>1.2 Provide the petition form ( R.A. 9048/R.A 10172 form No. 1.1) to the client;</li> </ul>	*Php 3,000.00= filling fee *Php 300.00 =service fee	20 minutes 15 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)	

	1.c Issue order of payment upon receipt the accomplishe d petition form.		1 minute	
3. Submit the official receipt and sign the prepared petition	3.1 Receive the official receipt;	none	1 minutes	Priscilla Purisima (Municipal Civil Registrar)
	3.2 Prepare notice of posting and post to LCR Bulletin; issue notice of publication to the petitioner		3 minutes	Ilda Pagud (Administrative Aide IV)
4. Submit the notice of publication to newspaper publisher to publish petition			2 consecutiv e weeks	Newspaper publisher

5. Submit Affidavit of publisher and copy of newspaper clippings to the LCR once the publication is completed	5.1 Receive the newspaper clippings and affidavit of publication and decide merit of petition within 5 days and transmit the petition & supporting evidence to the Philippine Statistics Authority Legal Department for affirmation of MCR approval petition.	15 minutes 5 days	Priscilla Purisima Municipal Civil Registrar
	5.2 The petitioner will be contacted once the petition is affirmed and ready for the issuance at the PSA.		
Total		5 days and 55 minutes	

# **10. REGISTRATION OF LEGITIMATION**

Legitimation is the act of providing legitimacy, it is the process whereby an act process or ideology becomes LEGITIMATE.

Office or Division:	Local Civil Registry Office			
Classification:	Simple			
Type of Transaction:	Government to Client			
Who may Avail:	All residents			
CHECKLIST OF REQ	QUIREMENTS WHERE TO SECURE			
Certificate of live birth (1 or	priginal) Philippine Statistics Authority			
Joint affidavit of legitimatic parents	on signed by both Municipal Civil Registrar or Notary Public			
Certificate of no Marriage parents (2 photo copies)	(CENOMAR) of Philippine Statistics Authority			

Marriage certificate (2 photo copies)		Philippine Statistics Authority/ Municipal Civil Registrar's Office				
Community Tax Certificate			Municipal Treasury Office			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE		
<ol> <li>Submit requirements</li> </ol>	1.1 Receive and review the documents;	*Php 500.00- filling fee	20 minutes	Priscilla Purisima (Municipal Civil Registrar)		
	1.2 Prepare the affidavit of legitimation and assigned registry number, date of registration, and certification s;		20 minutes	Ilda Pagud (Administrative Aide IV)		
	1.4 Record in the registry of legal instrument;					
	1.5 Issue order of payment		1 minute			
2. Submit the official receipt and sign the affidavit of Legitimation	2. Receive the official receipt and release the document;	none	5 minutes	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative		
	3. Advice the client to send the documents to the Philippine Statistics Authority			Aide IV)		
Total	•		51 minutes			

### 11. **REGISTRATION OF COURT DECREE**

Registration of Court orders is necessary before the annotation of certificates be effected.

Office or Division:	Local Civil Regis	stry Office		
Classification:	Simple			
Type of Transaction:	Government to Client			
Who may Avail:	All residents born in the municipality of San Ildefonso, Ilocos Sur			
CHECKLIST OF REQU	UIREMENTS		WHERE TO SE	CURE
2 set of court decision (cer	tified)	Court		
Certificate of finality (certif	ied)	Court		
Certificate of authenticity	(certified)	Court		
Certificate of registration		Municipal Civ located	vil Registrar wh	ere the court is
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
1. Submit the requirements	<ul> <li>1.1 Examine the document;</li> <li>1.2 Prepare the annotated and un- annotated certificate and sign;</li> <li>1.3 Issue order of payment;</li> </ul>	Php 1,500 = annulment of marriage, declaratio n of absolute nullity of marriage, court order setting aside decree of legal separation	20 minutes 15 minutes 1 minute	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
2. Receive copy of annotated document;	3. Release the document	None	1 minute	Priscilla Purisima (Municipal Civil Registrar) Ilda Pagud (Administrative Aide IV)
Total	1		37 minutes	

# **MUNICIPAL AGRICULTURE OFFICE**

**External Services** 

#### 1. PROVISION OF TECHNICAL ASSISTANCE

The Municipal Agriculture Office offers free field technical services and other extension services. The concerned Agricultural Extension Worker's (AEW's), upon request, does actual fieldvisitation and give on-the-spot recommendations.

Office or Division:				
Classification:	Simple			
Type of Transaction:	G2C – Government to Client/s			
Who may avail:	Rice, High Value Crops, Livestock and Fish Farmers			
CHECKLIST OF REQUIREMEN				
None		None		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Inform the Agricultural Extension Workers regarding the concern</li> </ol>	1. Interviewthe client		5 minutes	Ricardo D. Formoso Livelihood Assistant A
1.1 For crops and livestock	<ul> <li>1.1.1 Conduct field inspection/Visit and inform proper needed technologies</li> <li>1.1.2 Recommend proper preventive and control measures of pests and diseases</li> </ul>		60 minutes	Renel C. Pintor Agricultural Technologist Manuel T. Rocod Cooperative Management Specialist I John Glenn C. Pagud Municipal Agriculturist
1.2 For fisheries	1.2.1 Undertakes Aquafarm inspection/visits and inform proper needed technologies 1.2.2 Recommend proper management, development and conservation of fisheries and aquatic resources	None		
TOTAL	103001003		1 hour and 5	
			minutes	

# 2. DISTRIBUTION OF SUBSIDIZED COMMODITIES (RICE, CORN, VEGETABLES) AND OTHER PRODUCTION INPUTS

The Municipal Agriculture Office will ensure the quality and quantity of produce through the distribution of hybrid and certified seeds, and other production inputs to farmers

Office or Division:	Municipal Agri	culture Office			
Classification:		Simple			
Type of Transaction:		G2C – Government to Client			
Who may avail:	Registered Farn	ners			
CHECKLIST OF REQUIREM	IENTS	WHERE TO SECU	IRE		
RSBSA Number			iculture Office		
CLIENT STEPS	AGENCY ACTIONS	fees to be PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Consult regarding available subsidized commodities and other interventions</li> <li>Sign and receive the requested interventions</li> </ol>	<ul> <li>1.1</li> <li>Interview the client and verify if he/she is included in the master list</li> <li>3.1 Assist the client in accomplishi ngthe receiving form and release the requested interventio ns</li> </ul>	None	5 minutes 5 minutes	Ricardo D. Formoso Livelihood Assistant A Renel C. Pintor Agricultural Technologist Manuel T. Rocod Cooperative Management Specialist I John Glenn C. Pagud Municipal Agriculturist	
TOTAL	115		10 minutes		

# 3. PROVISION OF ANIMAL HEALTH CARE SERVICES

The Municipal Agriculture Office personnel extends animal health care services to thelivestock raisers/growers' clientele which is schedules per barangay.

Office or Division:	Municipal Agriculture Office				
Classification:	Simple	Simple			
Type of Transaction:	G2C-Govern		ent		
Who may avail:		Livestock Raisers/Growers			
CHECKLIST OF REQUIREMEN	ITS	TS WHERE TO SECURE			
None		-			
CLIENT STEPS	AGENCY ACTIONS	FEES TOPROCESSINGPERSONBE PAIDTIMERESPONSIBLE			
TOTAL 5 minutes					
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### **3. ISSUANCE OF CERTIFICATION AND OTHER PERTINENT DOCUMENTS**

Issuance of certification and other pertinent documents from Agriculture Office

Office or Division:	Municipal Agriculture Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Client			
Who may avail:	Farmers			
CHECKLIST OF REQUIREME	INTS	WHERE TO SECURE		
<u>Loan Purposes:</u> a. Letter Request <u>Animal Inspection/P</u> a. Barangay Certi <u>Animal Health Certif</u>	ificate	-Requesting Clie -Barangay Capt		
<ul> <li>a. Certificate of A</li> <li>b. Transport Carrie</li> <li>c. BAI Certificatio</li> <li>d. Handler's Licer</li> <li>e. Animals to be in</li> </ul>	nimal Origin er License n se nspected ecord (if required) Reclassification	-Bureau of Anim -BAI -BAI -Requesting Clie	ent ent/ Farm Veterinc	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the needed requirements	1.1 Check the completeness of the requirements	None	5 minutes	Ricardo D.
	1.2 Issue Order of Payment			Formoso Livelihood Asst. A
2. Present official receipt and claim document	2.1 Issue document		5 minutes	Ricardo D. Formoso Livelihood Asst.

		А
		Renel C. Pintor Agricultural Technologist
		Manuel T. Rocod Cooperative Development Specialist I
		John Glenn C. Pagud Municipal Agriculturist
TOTAL	10 minutes	

### 4. PROVISION OF INSURANCE SERVICES FOR CROPS, FISHERIES, LIVESTOCK AND LIFEINSURANCE

The Municipal Agriculture Office renders technical assistance in availing the program of Philippine Crop Insurance Corporation

Office or Division:	Municipal Agriculture Office			
Classification:	Simple	Simple		
Type of Transaction:	G2C – Governme	nt to Client		
Who may avail:	Farmers			
CHECKLIST OF REQUIREMEN	NTS	WHERE TO SEC	CURE	
Photocopy of any Gove (2copies)	ernment issued ID	Client		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the requirements and provide information/ data	1.1 Interview the client and validate if he/she is included in the Registry System for Basic Sectors in Agriculture (RSBSA)	None	15 minutes	Ricardo D. Formoso Livelihood AssistantA Renel C. Pintor Agricultural Technologist

2. Sign the necessary documents and pay the desired amount to be covered (for lifeinsurance only)	<ul> <li>2.1 Assist the client in accomplish ingthe receiving form</li> <li>2.2 Submit properly filled-up applicatio n to the nearest branch office of the Philippine Crop Insurance Corporati on (PCIC)</li> </ul>	None (For Life Insurance - Depends onthe desired insurance coverag e) *See Table A	5 minutes 2 days	Manuel T. Rocod Cooperative Development Specialist I John Glenn C. Pagud Municipal Agriculturist
TOTAL			2 days, 20 minutes	

### 5. AGRICULTURAL BASE DATA

The Municipal Agriculture Office provides free access of agricultural base data to all concerned individuals, in private or in public institutions, for their research and policy making.

Office or Division:	Municipal Agric	ulture Office	9		
Classification:	Simple	Simple			
Type of Transaction:	G2C-Governr	nent to Clie	nt		
Who may avail:	All private and				
CHECKLIST OF REQUIREMEN	NTS	WHERE TO S	ECURE		
Letter Request					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. State concern	1.1 Prepare and print data	None	15 minutes	Ricardo D. Formoso Livelihood Assistant A Renel C. Pintor Agricultural Technologist	
2. Claim Document	2.1 Issue Document	None	1 minute	Manuel T. Rocod Cooperative Development Specialist I John Glenn C. PagudMunicipal Agriculturist	
TOTAL			16 minutes		

#### 6. PROJECT PROPOSALS, RESOLUTIONS AND FARM BUSINESS PLAN PREPARATIONS

The Municipal Agriculture Office renders technical assistance to Rural-based Organizations in the preparation of project proposals, resolutions and farm business plans in order to avail farm machineries, equipment, projects and financial assistance from DA and other agencies.

Office or Division:	Municipal Agricu	ulture Office			
Classification:	Simple				
Type of Transaction:	G2C – Governm	G2C – Government to Client			
Who may avail:	All private and p	oublic indivic	Juals		
CHECKLIST OF REQUIREMEN	ITS	WHERE TO S			
1. Certificate of Reg Photocopy)	gistration (1	sec, cda			
2. Good Standing (1	Photocopy)	SEC, CDA			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit the requirements and state purpose	1.1 Prepare andprint project proposal, resolution and farm business plan and cooperative plan	None	2 days	Renel C. Pintor Agricultural Technologist Manuel T. Rocod Cooperative Development Specialist I John Glenn C. PagudMunicipal Agriculturist	
2. Receive project proposal, resolution andfarm business plan	2.1 Print and issue documents	None	5 minutes	Renel C. Pintor Agricultural Technologist John Glenn C. PagudMunicipal Agriculturist	
TOTAL			2 days & 5 minutes		

## 7. ASSISTANCE IN DOCUMENTATION AND REGISTRATION OF COOPERATIVES, FARMERS ASSOCIATIONS AND OTHER NON-GOVERNMENT ORGANIZATIONS

The Municipal Agriculture Office facilitates the documentation and registration of cooperatives, farmers associations and other NGOs based on the group's interest and their need to be registered

Office or Division:	Municipal Agric	ulture Office	9	
Classification:	Simple			
Type of Transaction:	G2C – Government to Client			
Who may avail:		armers Asso	ciations and other N	NGOs
CHECKLIST OF REQUIREMEN	ITS	WHERE TO S	ECURE	
Company Registratio	n	www.cda.gov	<u>ph</u> , www.sec.gov.ph	
Registration Applicati				
By-Laws				
Articles of Incorporati	on			
Ancies of incorporati	AGENCY	FEES TO		PERSON
CLIENT STEPS	ACTIONS	BE PAID	PROCESSING TIME	RESPONSIBLE
1. Submit all the registration requirements	1.1 Checks the completen ess, correctness and authenticity of the documents	None	10 minutes	Manuel T. Rocod Cooperatives Development Specialist Renel C. Pintor Agricultural Technologist John Glenn C. Pagud Municipal Agriculturist
2. Submit corrected/completed documents	2s.1 Conducts final checking of documents submitted 3.2 Submit documents to CDA/ SEC personnel 3.3 Advice the client for approval	None	10 minutes	
TOTAL	· · · ·		20 minutes	

#### Table A:

#### AGRICULTURAL PRODUCERS III. PRINCIPAL SUM AND ANNUAL PREMIUM **PROTECTION PLAN** PLAN/PREMIUN Premium Per Insured P 15T P 20T P 25T P 30T P 35T P 40T Agricultural Producers Protection Plan (AP3) is an P 45T P 50T 112.50 150.00 187.50 225.00 262.50 300.00 insurance protection for agricultural producers, 337.50 375.00 Notes: 1. Premium Rate is 0.75%, regardless of age. Premiums are inclusive of taxes. 2. Under the group insurance cover, a group can only avail of one (1) group plan; however a group member may avail of an additional plan; 3. Two (2) or more policies may be availed of at any given time per insured individual, provided, the aggregate sum insured per individual shall not exceed P 100,000, all to be honored separately in case of claims: farmers, fisherfolk and other stakeholders that covers death of the insured due to accident. natural causes, and murder or assault. aggregate sum insured per individual shall not exceed P 100,000, all to be honored separately in case of claims; 4. Those with ages sixty six (66) to eighty (80) years old shall be covered up to a maximum of P 50,000.00 only. I. ELIGIBILITY Agricultural producers, farmers and fisherfolk, preferably with existing agricultural and/or IV. COVERED RISKS Death of the insured resulting from: Accident; Natural causes; and Murder or assault crop insurance coverage with PCIC, including their family members up to the 4th degree of consanguinity or affinity; farm workers, hired or otherwise; and other agricultural stakeholders whose age ranges from fifteen Dismemberment/disablement benefits due to accident, as follows: (15) to eighty (80) years old and generally in Description **Maximum Benefits** Remarks healthy condition. ۲ ۲ Loss of both hands or both feet or sight of both eyes 100% **II. PERIOD OF INSURANCE COVERAGE** Loss of either hand or foot and sight of one eye 100% The benefits shall be based on the total sum sured (percentage of TSI) Duration — One (1) year period. Commencement — On the date indicated Loss of one hand and one foot 100% Loss of either hand or foot 50% on the Certificate of Cover (COC). • Termination — On the expiry date Loss of sight of one eye 50% indicated in the COC. V. EXCLUDED RISKS Death caused by any of the following: War, invasion, act of foreign enemy, hostilities, or warlike operations, mutiny, terrorism, riot, civil commotion, strike, civil war, rebellion, revolution and insurrection, and atomic fission or radioactive contamination; Intentionally self-inflicted injuries, suicide or any attempt thereat, while sane or insane; Vehicular accidents while driving under the influence of ligure or prohibited drugs; · Engagement in hazardous sports or occupation; Illegal acts of the insured; Engagement in aviation other than as a passenger in commercial flight; · Abortion, except when pursued as a medical intervention; and · Incidents occurring before the effectivity and after the expiry of the insurance coverage as indicated in the COC.

influence of liquor or prohibited drugs; Rendering military and paramilitary services

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# MUNICIPAL PLANNING AND DEVELOPMENT OFFICE

**External Services** 



### 1. ISSUANCE OF LOCATIONAL CLEARANCE

All enterprises of public and private persons constructing new buildings or applying for expansion/renovation are required to secure Zoning Clearance upon application of Building Permit. This should be done before the start of the construction to ensure that the building to be constructed or activity to be undertaken is allowed in the area as per Comprehensive Land Use Plan of the Municipality.

Office or Division:	Municipal Planning and Development Office (MPDO)				
Classification:	Complex				
Type of	G2C-Government to Client				
Transaction:					
Who may avail	Undergoing Construc				
CHECKLIST OF REQUIR		WHERE TO SECURE			
1. Duly notarized App Zoning Clearance	lication Form for	<ul> <li>MPDO</li> </ul>			
2. Vicinity Map - (1 or	iginal)	<ul> <li>Assessor's Office</li> </ul>			
3. Bill of Materials - (1	original)	<ul> <li>Owner/Practicing Professionals (Architect/Engineer)</li> </ul>			
4. Real Property Tax D original / Certified F	•	Assessor's Office			
5. Site Development I Embankment) - (1 c		<ul> <li>Owner/Practicing Professionals (Architect/Engineer)</li> </ul>			
- Deec - Autho Oc	ed - (1 issued) ojection of adjacent eeded - (1 issued) - Duly Notarized ract of lease d of Absolute Sale orized to ccupy/Use lot	<ul> <li>Department of Environment and Natural Resources (DENR)</li> </ul>			
At	ial Power of torney				
- Ord Rec	ts: - (1 Original) davit of Undertaking inance of lassification or iversion				



of	der from Department Agrarian Reform AR)			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE
<ol> <li>Submit Notarized Application Form with the required documents</li> </ol>	1.1. Validate the documents submitted as per checklist	None	5 minutes	ARCH. RYAN JAY PECHO, ENP MPDC APPLE JOY PUMEG-AS Planning
	1.2. Review and assess the Bill of Materials and schedule for site inspection	None	5 minutes	Officer II ARCH. RYAN JAY PECHO, ENP MPDC
			3 hours	
	<ul> <li>1.3. Site</li> <li>Inspection</li> <li>1.4. Issue Order of payment based on chart</li> </ul>	Refer to Chart below	5 minutes	ARCH. RYAN JAY PECHO, ENP MPDC PERLITO TAPICERIA Admin Aide IV ARCH. RYAN JAY PECHO, ENP MPDC
2. Pay	2.1. Receive payment and Issue Official Receipt	Refer to Order of Payme nt	5 minutes	MERRIAM REVIBES Revenue Collection Clerk III TERESITA ROJAS Revenue Collection Clerk III



	1	1		1
3. Present Official Receipt	3.1. Receive Official Receipt and	None	2 minutes	PERLITOTAPICE RIA MYRNA RAFANAN APPLE JOY PUMEG-AS
	3.2 Prepare, print and sign the	None	5 minutes	Planning Officer II
	Locational Clearance			PERLITOTAPICE RIA APPLE JOY PUMEG-AS Planning
	3.3 Record and Issue	None	3 minutes	Officer II ARCH. RYAN JAY PECHO, ENP MPDC
				MYRNA RAFANAN Draftsman III
	·	Refer to	3 hours and 30	
TOTAL		chart	minutes	



### FEES: (Subject to change without prior notice)

project Cost of which:	HLURB Rates
1. P 100,000.00	P 288.00 + 12
2. Over P 100,000 to P 200,000	P 576.00 + 12
3. Over P 200,000.00	
B. Apartments	·
1. Project cost of P 500,000.00 and below	P 1,440.00
1. Over P 500,000 to 2 million	P 2,160.00
2. Project cost over P 2 million	P 3,600 .00 + 1/10 of 1% of cost excess of P 2.M
million	regardless of number of doors
C. Dormitories	
1. Project cost of P 2 Million and below	P 3,600.00
2. Project cost over P 500,000	P 3,600.00 + 1/10 0f 1% 0f cost in excess of 2.M
	regardless of number of rooms
D. Institutional:	
1. Below P 2 Million	P 2,880.00
2. Over P2 Million	P 2,880.00 + 1/10 of 1% of cost in excess of P
	2. M
E. Commercial, Industrial, Agro-Ind	
1. Below P 100,000.00	P 1,440.00
2. Over P 100,000.00 – P	P 2,160.00
500,000.00	
3. Over P 500,000.00	P 2, 880.00
4. Over P1 Million-P2 Million	P 4,320.00
5. Over P 2 Million	P 7,200.00 + 1/10 of 1% of cost in excess of P 2
	Million
F. Special Uses/ Special Projects in	
	hter House, Treatment Plants, etc.
1. Below P 2 Million	P 7,200.00
2. Over P 2 Million	P 7,200.00 + 1/10 of 1% of cost in excess of P 2
	Million ted Area/Cost of Expansion Only) Same as



### 2. ISSUANCE OF ZONING CERTIFICATE

Zoning Certification is requested for record and reference purposes, based on the Comprehensive Land Use Plan of the municipality.

Office or Division:	Municipal Planning and Development Office (MPDO)			
Classification:	Simple			
Type of Transaction:	G2B – Government to Business/Client			
Who may avail:	Lot owners			
CHECKLIST OF REQU	JIREMENTS	WHERE TO S	ECURE	
<ul> <li>One (1) copy of:</li> <li>1. Letter-Request a Zoning Coordinator</li> <li>Development Offic</li> <li>2. Lot Plan with vicit to scale signed b Engineer</li> <li>3. Transfer Certification</li> <li>or Deed of Sale</li> <li>4. Real Property Ta</li> <li>5. Certificate of Re</li> <li>Payment</li> <li>6. If applicant is non Duly notarized Contract of Lea</li> <li>Absolute Sale, or</li> <li>Occupy or</li> <li>Use</li> <li>1. Special Powe</li> <li>land owner's representative</li> </ul>	r/Planning and er inity map drawn by a Geodetic ate of Title (TCT) x Declaration al Property Tax t the owner: copy of se or Deed of and authority to r of Attorney of authorized	<ul> <li>ASSESSORS OFFICE</li> <li>TREASURERS OFFICE</li> </ul>		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit request with the required documents	1.1 Receive and check the documents.	None	3 minutes	PERLITO TAPICERIA Admin Aide IV APPLE JOY PUMEG-AS Planning Officer II
	1.2 Issue Order of Payment	Php 720	2 minutes	ARCH. RYAN JAY PECHO, ENP MPDC



3. Pay	2.1 Receive payment Issue Official Receipt	Refer to Order of payment	5 minutes	MERRIAM REVIBES Rev. Coll. Clerk III TERESITA ROJAS Rev. Coll. Clerk III
4. Present Official Receipt	3.1 Prepare, sign and issue Zoning Certificate	None	5 minutes	PERLITOTAPICERIA APPLE JOY PUMEG-AS Admin. Aide IV ARCH. RYAN JAY PECHO, ENP MPDC
	3.2 Record and Issue	None	3 minutes	MYRNA RAFANAN Draftsman III
	TOTAL	P 720.00/ document	18 minutes	



### 3. ISSUANCE OF DATA FROM MUNICIPAL PLANNING AND DEVELOPMENT OFFICE

Information about the Municipality and its development thrust, plans, programs and projects are available at the MPDO which includes:

- Socio-Economic Profile
- Land Use Plan
- Economic Development Data
- Development Plans
- Municipal statistics
- Municipal and Barangay Maps

Office or Division:	Municipal Planning and Development Office (MPDO)				
Classification:	Simple				
Type of Transaction:	G2G - Government to Government / G2B - Government to Business/ G2C - Government to Client Citizens				
Who may avail:	Public	<b>1</b>			
CHECKLIST OF REQUIRE	MENTS	WHERE TO	SECURE		
<ol> <li>Letter Request st data/information purpose.</li> <li>Identification Co requesting party</li> </ol>	n needed and ard of the	Self-produ	liced		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present letter request and ID for verification	<ul> <li>2.1. Receive the letter and verify availability of data.</li> <li>2.2. Issue Information /documents</li> </ul>	None	10 minutes 10 minutes	PERLITO TAPICERIA Admin Aide IV APPLE JOY PUMEG-AS Planning Officer APPLE JOY PUMEG-AS Planning Officer ARCH. RYAN JAY PECHO,	
TOTAL		None	20 minutes	ENP MPDC	



### 4. ISSUANCE OF DEVELOPMENT PERMIT

The Development Permit is the final permit issued or granted to any developer already issued with Preliminary Approval and Locational Clearance (PALC) which will allow him/her proceed with the detailed and necessary development activities as reflected in the approved plans

Office or Division:	Municipal Plannir	ng and Development Office (MPDO)	
Classification:	Higly Technical		
Type of Transaction:	G2G - Government to Government / G2B - Government to Business/ G2C - Government to Client Citizens		
Who may avail:	Public		
CHECKLIST OF REQUIRE	MENTS	WHERE TO SECURE	
<ul> <li>For Preliminary Approv Locational Clearance         <ul> <li>a) Four sets of the follow duly signed by licens</li> <li>Engineer/Architect:                 <ul> <li>Vicinity Map (with kilometer-radius fr periphery of the p Showing the relating proposed project community facilititie</li> <li>Site Development (Schematic Plan) proposed lay-out</li> <li>Survey Plan of the described in the C Titles of Lots subject application</li></ul></li></ul></li></ul>	(PALC) only: ving documents ed a minimum of 2 om the project site. onship of the to existing es and utilities Plan showing the lots as Certificates of ct of the of Titles and Tax cation should not nonths old upon 1 copy) ce from urian Reform ural Lands only (2	Office of Municipal Planning and Development Office Office of the Municipal Assessor Department of Agrarian Reform (DAR)	



<ul> <li>b) Topographic Plan t existing conditions line, streets and ea and adjacent to th ground/ spot eleve condition on the la</li> <li>c) For Land Developm (duly signed by a Li Engineer/Architect</li> <li>Final Site develo Subdivision Plan</li> <li>Road Design (Geometric and Design)</li> <li>3. Storm Drainage System Plan</li> </ul>	like boundary sement/ utilities e project ation and other nd (2 copies) nent Projects icensed ) – 4 copies pment/			
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON
	ACTION	BE PAID	TIME	RESPONSIBLE
<ol> <li>Submit requirements for review and</li> </ol>	1.1 Receive documents submitted	None	5 minutes	APPLE JOY PUMEG- AS Planning Officer II
assessment	1.2 Review documents	None	15 minutes	RYAN JAY PECHO MPDC
	1.3 Conduct inspection at the applied location of the project	None Refer to Table below	1 hour 5 minutes	RYAN JAY PECHO MPDC PERLITO TAPICERIA Admin Aide IV RYAN JAY PECHO MPDC
	1.4 Issue Order of Payment			
2. Pay	3 Receive payment and Issue Official Receipt	Refer to Order of payment	5 minutes	MERRIAM REVIBES Rev. Coll. Clerk III TERESITA ROJAS Rev. Coll. Clerk III
4. Present Official Receipt	3.1 Prepare, sign and issue approved Development Permit	None	5 minutes	PERLITOTAPICERIA Admin Aide IV APPLE JOY PUMEG-AS Planning Officer II ARCH. RYAN JAY PECHO, ENP MPDC
		None	3 minutes	MYRNA RAFANAN



	3.2 Record and Issue		Draftsman III
		1 hour	
TOTAL		38 minutes	

### FEES: (Subject to change without prior notice)

PD957) na. or a fraction thereof / ha regardless of density
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# SANGGUNIANG BAYAN OFFICE

**External Services** 



### 1. ISSUANCE OF MOTORIZED TRICYCLE OPERATOR'S PERMIT

Prospective operators of motor tricycles should first secure a Motorized Tricycle Operator's Permit (MTOP) from the Sangguniang Bayan. An MTOP is a document granting franchise or license to a person, natural or juridical, allowing him to operate tricycle-for-hire over specified zones. Only Filipino citizens and partnership or corporation with sixty percent (60%) Filipino equity shall be granted the MTOP. No MTOP shall be granted by the municipality unless the applicant is in possession of units with valid registration papers from the Land Transportation Office (LTO). MTOP issued has a validity of three (3) years.

Office or Division:	Sangguniang B	Sangguniang Bayan (SB) Office		
Classification:	Highly Technical			
Type of Transaction:	G2C – Governr	nent to Citize	ens	
Who may avail:	Motorized Tricy	cle Operato	ſS	
CHECKLIST OF REQUIR	-	•		
<ol> <li>Filled out Application</li> <li>Community Tax Photocopy)</li> <li>2pcs 1x1 picture</li> <li>Photocopy of Bacclearance</li> <li>Photocopy of Dr</li> <li>Photocopy of Or</li> <li>Certificate of Re</li> <li>(OR/CR) from LTG</li> <li>Photocopy of the Policy of vehicle</li> <li>Photocopy of the Policy of th</li></ol>	ation Forms (2 Certificate (1 of driver arangay iver's License ificial Receipt/ gistration O e Insurance (1)	WHERE TO SECURE         Owner/Operator         Municipal Treasury Office/Barangay         Owner/Operator		
if applicable	AGENCY	FEES TO	PROCESSIN	PERSON
CLIENT STEPS	ACTION	BE PAID	G TIME	RESPONSIBL E
1.1 Submit complete requireme nts (Sangguni ang Bayan Personnel Assigned	1.1 Evaluate the requirement s submitted and issue an order of payment	MTOP Fee – Php750.0 0 Parking Fee – 200.00	30 minutes	JOEY P. TADIQUE Bookbinder II

### 1.A For New Applicant / Renewal



notarized MTOP Application Form and received the MTOP	2.1 Release the MTOP Application Form and Special Authority for Motorcycle- for-hire Franchise.	Inspectio n Fee – 100.00 Permit to Operate (Mayor's Permit) – 300.00 Service Fee – 150.00 None	15 minutes	JOEY P. TADIQUE Bookbinder II
TOTAL		1,050.00	45 minutes	

### 2. ISSUANCE OF CERTIFIED COPIES OF DOCUMENTS UPON REQUEST

Furnish, upon request of any interested party, certified copies of records of public character in custody, upon payment to the Municipal Treasury Office of such fees as may be prescribed by ordinance.

Office or Division:	Sangguniang Bayan (SB) Office			
Classification:	Simple			
Type of Transaction:	Multiple Type of Ins	struction		
Who may avail:	Citizen/Business/Co	orporation/Ot	her Governme	nt Agencies
CHECKLIST OF REQUIRE	MENTS	WHERE TO SECURE		
1. Letter request		Citizen/Business/Corporation/Other Government Agencies		n/Other
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE



2 minutes PAULINE P.
CORTEZ
SB Secretary
20 minutes
PAULINE P.
CORTEZ
SB Secretary
per
ary's 15 minutes PAULINE P.
CORTEZ
SB Secretary
3 minutes PAULINE P.
CORTEZ
SB Secretary
0 40 minutes
e 40 minutes

### 3. FILING OF ADMINISTRATIVE CASE / COMPLAINT AGAINST ERRING BARANGAY OFFICIALS

A complaint against any elective barangay official shall be filed before the Sangguniang Bayan pursuant to the authority vested under Section 61 of R. A. 7160 otherwise known as the Local Government Code of 1991.

Office or Division:	Sangguniang Bayan (SB) Office		
Classification:	Highly Technical		
Type of			
Transaction:	G2C – Government to Citizens		
Who may avail:	Any interested citizen/party		
CHECKLIST OF R	EQUIREMENTS	WHERE TO SECURE	



<ol> <li>Notarized Affidavit of Complaint (should contain the complete name and designation the respondent/s including prayer)</li> <li>Notarized Certificate of Non-Forum Shopping</li> <li>Affidavit/s of witness/es</li> <li>Certified Copies of evidence/s in support of the charge/s</li> <li>Other documents to support the complaint</li> </ol>		<ul> <li>Citizen/Complainant</li> <li>Citizen/Complainant/Witness/e</li> <li>Concern agencies/offices</li> <li>Citizen/Complainant</li> </ul>		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out logbook and submit complete requirements to the Office of the Sangguniang Bayan in two (2) sets/ copies.	<ul> <li>1.1 Check and evaluate the requirements submitted and receive the documents. If incomplete, inform the client in writing the lacking requirements.</li> <li>1.2 Within 7 days upon receipt of the complaint, notify the respondent about it and demand for his verified answer within 14 working days upon receipt</li> </ul>	None	20 minutes 7 days Maximum of 14 days	PAULINE CORTEZ SB Secretary PAULINE CORTEZ SB Secretary ROBERT RIEGO Vice Mayor
	1.3 Upon receipt of the response, calendar the business on the next session and determine if there is a probable cause to that particular complaint and for the body to choose if they will create an adhoc committee or		10 working days	Ad-hoc Committee



2. Attend Preliminary Conference	hear the matter committee as a whole 1.4 Preparation for the Preliminary Conference and set its schedule 2.1 Conduct a Preliminary Conference to convince both parties to have an amicable settlement.	none	1 day	Ad-hoc Committee
3. Attend scheduled hearings and ocular inspection	3.1 Schedule and conduct Committee Meetings, Hearings and Ocular Inspection		Maximum of 90 days	Ad-hoc committee
	3.2 Prepare & Submit Individual Committee Member Recommendation.	None	(step 1-7)	Ad-hoc committee
	3.3 Render and approve Committee's Majority decision in a regular session of the Sanggunian.	None		Ad-hoc committee
	3.4 Prepare Resolution and submit the same to Vice Mayor & Committee Members for their signature	None		Ad-hoc committee
	3.5 Issue or release copies of the decision to both parties	None		PAULINE CORTEZ SB Secretary
	3.6 Disseminate copies of the decision to other	None		PAULINE CORTEZ



concern offices and agencies		SB Secretary
TOTAL	122 days and 20 minutes.	

### 4. ISSUANCE OF CSO ACCREDITATION

The Local Government Code of 1991 mandates local government units to promote the active participation of non-governmental organizations (NGOs) in government affairs and activities towards common objective. DILG Memorandum Circular No. 2019 – 72 provides for the guidelines in the accreditation of civil society organizations which provides that the power to issue CSO Accreditation is within the Sangguniang Bayan.

Office or Division:	Sangguniang Bayan (SB) Office				
Classification:	Highly Technical				
Type of Transaction:	G2C – Government	to Citizens			
Who may avail:	Civil Society Organiz	ations/Non-Government Organizations			
CHECKLIST OF REQUIRE	MENTS	WHERE TO SECURE			
<ol> <li>Letter of Appl</li> <li>Duly accomp Form for Accr</li> <li>Board Resolut</li> </ol>	lished Application editation	CSO/NGO CSO/NGO CSO/NGO			
intention for c accreditation 4. Certificate of the appropric	Registration from	CSO/NGO			
agency or bo 5. List of Current Members	•	CSO/NGO CSO/NGO			
that the CSO non- partisan organ will retain its a pursuing the c the people's in membership in body, after sa requirements o stated in DILG	n Statement stating is an independent, nization and that it utonomy while idvancement of nterest through its n a local special tisfying all the and set criteria, as Memorandum 019 – 72 dated May	CSO/NGO			



22, 2019, and after securing	
accreditation from the	CSO/NGO
Sangguniang Bayan	CSO/NGO
<ol><li>Previous Year's Annual</li></ol>	
Accomplishment Report	CSO/NGO
8. Previous Year's Financial	000/1100
Statement	CSO/NGO
9. Profile indicating the purposes	-
and objectives of the	Barangay where NGO/CSO Office is
organization	
10. Copy of the Minutes of the	Municipal Agriculture Office
Meeting of the organization	
11.By-laws of the organization	
12. Barangay Certification that the	CSO/NGO
association is existing	
13. MAO Certification attesting to	
the existence of the association	
(for farmers	
Association only)	
14. Other documents that would	
support the request	
accreditation	

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Fill out logbook and submit complete requirements</li> </ol>	<ol> <li>1.1 Review the completeness and veracity of the documents.</li> </ol>	None	10 minutes	PAULINE CORTEZ SB Secretary
	1.2 Include the application in the Calendar of Business for the next scheduled SB session.	None	1 regular session day	SB Committee on Rules, SB Secretary
	1.4 Refer the application to appropriate /committee concern	None		Presiding Officer
2. Attend committee meetings, hearings, and ocular	2.1 Schedule and conduct committee meetings, hearings, and	None		PAULINE CORTEZ SB Secretary



· · · · · · · · · · · · · · · · · · ·		1.		, ,
inspection (If	ocular	None		
necessary)	inspection.			SB Committee
			Maximum of	concern
	2.2 Prepare	None	5 working	
	Committee		days	
	Report and		,	SB Committee
	Proposal			on Rules,
				SB
	2.3 Schedule	None		Secretary
	and calendar	None		
	the report and			
	proposal in SB			PAULINE
	Session for			CORTEZ
	approval			
				SB Secretary
	2.4 Draft the	None		
	approval		5 minutes	
	document and			
	submit the same			PAULINE
	to Vice Mayor &			CORTEZ
	Mayor for			SB Secretary
	signature			
	2.5 Receive			
	approved and			
	signed			
	document			
3. Proceed to SB	3.1 Conduct	None	1 Regular	
Office for the	awarding		session day	SB Office
awarding of	ceremony		,	
the certificate				
of				
accreditation,				
			7 days and 15	
TOTAL		None	minutes	

### 5. REVIEW OF BARANGAY BUDGET and ORDINANCES

Section 57 of R. A. 7160 otherwise known as the Local Government Code of 1991 states that within ten days of enactment of an ordinance, the Sangguniang Barangay shall furnish copies of all the barangay ordinances to the Sangguniang Bayan for review as to whether the ordinance is consistent with law and municipal ordinances.



Office or Division:	Sangguniang Bayan (SB) Off	ice			
Classification:	Highly Technical				
Type of Transaction:	G2G – Government to Government				
Who may avail:	Barangays	_			
CHECKLIST OF R	EQUIREMENTS	WHERE	TO SECURE		
1. Two (2) copies of	the ordinance for review	Barang	gay Secreta	ry	
ordinances requir	ndance of public hearing for ing prior public hearing vs, initial review certification	Barang	jay Secreta	ry	
U	n the Municipal Budget	Munici	oal Budget	Officer	
		FEES	-	PERSON	
CLIENT STEPS	AGENCY ACTION	TO BE PAID	NG TIME	RESPONSIBLE	
1.1 Fill out logbook 1.2Submit	<ol> <li>1.1 Check and evaluate the requirements submitted and receive the documents.</li> </ol>	None	15 minutes	Pauline Cortez SB Secretary	
complete requirements to the Office of the Sangguniang Bayan in two (2) sets/ copies.	<ul> <li>1.2 Calendar the business on the next session</li> <li>1.3 Refer to the committee on rules and privileges, Legal Matters and Good Government</li> </ul>	None None	2 minutes	Pauline Cortez SB Secretary Robert Riego Vice Mayor	
	1.4 Schedule and conduct committee meetings/hearings.	None	1 regular session day	Pauline Cortez SB Secretary	
	1.5 Prepare Committee Report and Proposal	None	(step 3- 5)		
	1.6 Schedule and calendar the report and proposal in SB Session for approval	None		SB Committee concern	
		None			



	TOTAL	None	3 days and 24 minutes	
2. Proceed to SB Office for the release of the approved document.	2.1 Release the approved document	None	2 minutes	Pauline Cortez SB Secretary
	<ul> <li>1.7 Draft the final approval and submit the same to Vice Mayor &amp; Mayor for signature</li> <li>1.8 Receive the approved and signed document</li> </ul>	None	2 working	SB Committee on Rules and SB Secretary Pauline Cortez SB Secretary

# 6. FILING OF APPLICATION FOR THE APPROVAL OF RECLASSIFICATION OF AGRICULTURAL LAND TO OTHER PURPOSE

Republic Act 7160, also known as the Local Government Code of 1991, vests a Municipality thru its Sanggunian with authority to reclassify agricultural land to other purpose.

Office or Division:	Sangguniang Bayan (SB) Office		
Classification:	Highly Technical		
Type of Transaction:	Multiple Type of Transaction		
Who may avail:	Citizen/Business/Corporation/Other Government Agencies		
CHECKLIST OF REQUIREMENTS WHERE TO SECURE		WHERE TO SECURE	



		1		
	addressed to the Vice		vner of the pro	
Mayor.	authorized Representative			
2. Title of the Property		2. Owner of the property or its		
			ed Representa <sup>.</sup>	
3. Tax Declaratio	n of the Property	3. Ov	vner of the pro	perty or its
		authorize	ed	
4. Certification from	om the Municipal	Represe	ntative / Munic	ipal Assessor
	or the payment of Real	4. Munic	ipal Treasury C	office
Property Tax				
	olution interposing no	5. Bai	rangay where <sup>·</sup>	the property is
objection in the requ		located	0 /	,
	om DAR - PARO certifying			
	Non-CARP Coverage	6. DA	R – MARO	
,	om the Municipal	0. 07		
Agriculture Office th	•	7. MU	nicipal Agricul	ture Office
-	viable for agricultural	1. 1010		
production / purpos	-			
8. Certification fro	om the Municipal	8. MU	inicipal Plannin	a and
Planning &			nicipal Plannin	
Development Office	e certifying the property's	Develop	meni	
zoning classification	based on the CLUP	Office		
9. Certification fro	om the National Irrigation			
Administration certify	ying that the property is			
not an irrigated land		9. National Irrigation		
	ents supporting the	Administration		
request, such as:				
- Deed of Sale of	the property			
		10. Owner of the property or its		
- Authorization Le	etter/SPA, if	authorized Representative.		
representative				
- Location/Vicinit	y Map of the property			
- Site Developme	ent Plan			
CLIENT STEPS	AGENCY ACTION	FEES TO	PROCESSING	PERSON
CLIEINI SIEFS	AGENCIACIÓN	<b>BE PAID</b>	TIME	RESPONSIBLE
1. SUBMIT complete	1.1 Check and	10.00	20 mins	PAULINE
requirements to	evaluate the	per		CORTEZ
the	requirements	square		SB
Office of the	submitted and	meter		Secretary
Sangguniang	receive the			
Bayan in three	documents.			
(3) sets/ copies.				
( ,,	1.2 Include the		2 minutes	
	application in the			SB
	Calendar of Business			
	for the next	None		Secretary
	scheduled SB session.	None		
1				
			1.000	
			1 session day	



1.3 Refer the application to appropriate/concern committee	None		SB Presiding Officer
<ul> <li>Conduct Committee Meetings, Hearings and Ocular Inspection</li> </ul>		2 days	SB Committee Concern
<ul> <li>Prepare Committee Report and Proposal for calendar to SB Session</li> </ul>		1 day	SB
1.4 Approve the application	None	1 regular session 1 day	Committee Concern and SB Secretary
1.5 Draft the final approval and submit the same to Vice Mayor & Mayor for their signature	None		SB Members and Sb
1.6 Receive approved and signed document	None	5 mins.	Secretary
			PAULINE CORTEZ SB Secretary

2. Return to SB Office for the release of the approved document	1.1 Release the copy of the approved Ordinance	None	2 mins	PAULINE CORTEZ SB Secretary
TOTAL		10.00 per square meter	6 days and 29 minutes	



### 7. ISSUANCE OF CERTIFIED COPIES OF DOCUMENTS UPON REQUEST

Furnish, upon request of any interested party, certified copies of records of public character in custody, upon payment to the Municipal Treasury Office of such fees as may be prescribed by ordinance.

Office or Division:	Sangguniang Bayan (SB) Office /Vice Mayor			
Classification:	Simple			
Type of Transaction:	Multiple Type of Instruction			
Who may avail:	Citizen/Business/Corporation/Other Government Agencies			
CHECKLIST OF REQUIRE	MENTS	WHERE TO SE	CURE	
<ol> <li>Letter request</li> <li>Interview with the Vice Mayor</li> </ol>		Citizen/Business/Corporation/Other Government Agencies		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
3. Submit letter request to SB Office and wait for the schedule of interview	1.1 Receive the request 1.2 Schedule the Interview	none	2 minutes 20 minutes	PAULINE P. CORTEZ SB Secretary PAULINE P. CORTEZ SB Secretary
4. Receive Endorsement	2.1 Release the requested document	None	3 minutes	PAULINE P. CORTEZ SB Secretary
TOTAL		none	25 minutes	



# **GENERAL SERVICE OFFICE**

Internal Services



### 1. PROCUREMENT OF COMMONLY USED SUPPLIES

To provide supplies needed for the different offices of LGU San Ildefonso, llocos Sur.

Office or Division:	General Services Office					
Classification:	Complex					
Type of Transaction:	G2G – Government to Government					
Who may avail: Different Offices of LGU San Ildefonso, Ilocos Sur						
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE				
Purchase Request		Client				
Project Procurement Management Plan		Client				
(PPMP)						
Technical Specifications (TS)		Client				
Project Proposal (for pr	ograms)	Client	Client			
CLIENT STEPS	AGENCY	FEES TO	PROCESSING	PERSON		
	ACTIONS	BE PAID	TIME	RESPONSIBLE		
1. Submit	1.1 Check	None	3 minutes	Nestor R.		
requirements	documents			Villegas		
	and issue			Supply Officer		
	purchase					
	request					
	number and					
	date.					
		None	2 days			
	1.2 Facilitate		,	Merriam		
	the			Revibes		
	accomplishm			BAC		
	ent of			Secretariat		
	required BAC					
	document					
	(Request for					
	quotation,					
	Abstract of					
	Quotation,	None	20 minutes			
	BAC Reso.					
	Philgeps and					
	mayor's					
	permit of the			Nestor Villegas		
	lowest	None	5 minutes	Supply Officer		
	supplier)					
	1.3 Check					
	documents	None	5minutes			
	and prepare					
	purchase					
	order (if					
	complete)	None	5 minutes			
	. ,			Municipal		
				Budget Office		



			hours & 8 minutes	
TOTAL		None	2 days 2	
2. Accept Goods	1.9 Inspect delivered goods and issue to the requesting office.	None	15 minutes	Nestor Villegas Supply Officer/ Inspector
	1.8 Prepare Accountant's Advice and submit to Land Bank of the Philippines.			
	documents and prepare Inspection and Acceptance Report and Request and Issuance Slip and Property Acknowledge ment Receipt (if needed). 1.7 Prepare and issue check			Municipal Treasury Office Accounting Office
	1.6 Verify the completeness of all	None	60 minutes	
	1.5 Prepare Disbursement Voucher.	None	5 minutes	Nestor Villegas Supply Officer
	1.4 Prepare certification of obligation.		10 minutes	Municipal Treasury Office



# **MUNICIPAL TREASURER'S OFFICE**

**External Services** 



### **1. ISSUANCE OF COMMUNITY TAX CERTIFICATE**

**COMMUNITY TAX FOR INDIVIDUAL** –every inhabitant of the Philippines 18 years of age or over, who have been regularly employed in a wage or salary basis or who engaged in business or occupation, or who owns real property with an aggregated assessed value of One Thousand (P 1,000.00) or more, who's required by law to file an income tax return shall pay an annual Community tax.

**COMMUNITY TAX FOR JUDICIAL PERSON**- every corporation engaged or doing business in the Philippines.

Office or Division:		MUNICIPAL TREASURER'S OFFICE			
Classification:		SIMPLE			
Type of Transaction:		G2C – Government to Client			
Who may avail:		All residents of San Ildefonso liable to pay and to judicial persons whose principal office is located within the municipality			
CHECKLIST OF REQU	IREMENTS		WHERE TO SECURE		
Gross receipts of ec Form 2316 (if Gover		ing year Provided by the Client			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID		PROCES SING TIME	PERSON RESPONSIBLE
1. SUBMIT the required documents	1.1Prepare Community Tax Certificate and Compute based on the gross receipt of earnings of the preceding year	INDIVIDUALS: (based on Revenue Code Chapter 6, Section 6.02) CORPORATION: (based on Revenue Code Chapter 6,		7 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III
2. Payment ,Receive & sign CTC	2.1 Receive payment & Issue Community Tax Certificate	Section 6.03) None		Alvin O. 3 Batuyong minutes Revenue Collection C II Elizabeth Ro Municipal Treasurer	
TOTAL:		INDIVIDUALS (based on Lo Revenue Co	ocal	10 Minutes	


Chapter 6, Section 6.02) <b>CORPORATION:</b> (based on Local Revenue Code	
Chapter 6, Section 6.03)	

#### 2. ISSUANCE OF BUSINESS PERMIT

Those imposed by the Local Government Unit on the privileges of engaging businesses, occupation, and other activities within its territorial jurisdiction.

Office or Division:	TREASURY OFFICE/BPLO		
Classification:	SIMPLE		
Type of Transaction:	G2C – Government to Client		
Who may avail:	The general public who a	re applying for Business Permit	
CHECKLIST OF REQUIREMENT	ſS	WHERE TO SECURE	
Registration of Business Nan	ne (FOR NEW BUSINESS)		
- Single Proprietor		DTI	
- Partnership		CDA	
- Corporation		SEC	
Barangay Business Clearand	ce (FOR NEW &	Barangay where the business	
RENEWAL OF BUSINESS)		is located	
Community Tax Certificate	(SEDULA)	Treasurer's Office	
Lease Contract (if rented)		Lessor	
Sanitary Permit		RHU	
Fire Safety Inspection Certifi	cate (FSIC)	BFP	
Sworn statement of Gross re of the preceding year/ Fina Statements/Certified Incom RENEWAL OF BUSINESS)	ncial	Provided by the Client	
Additional Requirement for - Operational Permit/Ir		DOH San Fernando, La Union	
Additional Requirement for - Environmental Comp New)	(Gas station) liance Certificate (For	DENR	
Additional Requirement for			
•	liance Certificate (For	DENR	
New)		Barangay where the Piggery is	
- Barangay Resolution		located	
Additional Requirement for	Private Commercial		
Establishments		MPDC/Mun Engineering	
- Building Permit (For N	ew)	Office	
<ul> <li>Inspection Report</li> </ul>		Mun. Engineering office	



Application for	m			) (Busines nsing Offic	s Permit & cer)
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAI	ID S	PROCE SSING TIME	PERSON RESPONSIBLE
1. Submit filled up application form with complete requirement s	1.1 Receive Application, Evaluate and assess the required documents & Compute fees	NONE	ı	20 minute s	Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III



	-		1	
2. Payment	2.1Receive Payment and Issue official receipt (if Compliant – issue FSIC, If Not to follow)	Refer to Revenue Code 2022 (For New Business) <b>Mayor's Permit</b> - as per table below base on Capital/Asset <b>Service Fee</b> - P75.00 <b>Documentary</b> <b>Stamp</b> - P30.00 <b>Sanitary Permit</b> - (depends on the area as per schedule on the Revenue Code 2022 (For Renewal of Business)	10 minute s	BFP Personnel Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection
		Business) Mayor Permit- as per table below base on Capital/Asset Service Fee- P75.00 Business Tax- Based on Gross Receipts and Tax table on Revenue Code 2022		Revenue
		Service Fee- P75.00 Police Documentary Stamp- P30.00 Sanitary Permit- (depends on the area as per schedule on the Revenue Code 2022		Ramos Municipal Treasurer
3.Claim, Sign and receive	3. Prepare , sign by the Mayor and Release Business permit	none	WITHIN THE DAY	RICA FLORENDO Administrative Aide IV



Business			
permit.			
TOTAL		1 DAY	
Fees to be Paid- Mayor's Permit			
Classification /Category		Rat	e of Fee/Annum
1. On Manufacturers/Importer	s/Producers		
Micro-Industry (P150,000.00 belo	w)	P 23	50.00
Cottage industry (aboveP150,00	0.00 to 1.5m)	5	00.00
Small-Scale Industries (P1.5M to	15M)	1	,000.00
Medium- Scale Industries (15M to	o 60M)	2,	000.00
Large-Scale Industries (above 60	DM)	4,	000.00
2. On Banks			
Rural, Thrift and Savings Bank		P 3,	.000.00
Commercial, Industrial and		5,	000.00
Development Banks		15,	000.00
Universal Banks		15,	000.00
3. On Other Financial Instit	utions		
Small			.000.00
Medium		-	.000.00
Large		12,	.000.00
4. On Contractors/Service	Establishments		
Micro-Industry			50.00
Cottage industry			00.00
Small-Scale Industrie			50.00
Medium-Scale Industries		-	00.00
Large-Scale Industries	a alava av Diatrikudava		00.00
5. On Wholesale/Retailers/D	ealers or Distributors		
Micro-Industry			00.00 00.00
Cottage industry Small-Scale Industries	<b>^</b>		00.00
		-	
Medium- Scale Industries3,500.00Large-Scale Industries5,000.00			
6. On trans-loading Operation	n	0,00	00.00
Medium		РЗ	.000.00
Large			.000.00
7. Other Businesses			
Micro-Industry		P 300	0.00
Cottage industry			).00
Small-Scale Industrie	S		).00
Medium-Scale Indus		2,000	
Large-Scale Industries		3,000	
Sanitary Inspection Fee			
1. For a house for rent		P 550	0.00
2. For each business industrial as a	nriquitural		
<ol> <li>For each business, industrial, or age establishment</li> </ol>	giiculiului	P 150	0.00
	ro but loss than 50	250.0	00
- With an area of 25 sq.m or mo		350.0	00
sq.m		450.0	00



- With an area of 50 sq.m or more but less than 100	550.00
sq.m	750.00
<ul> <li>With an area of 100 sq.m or more but less than 200</li> </ul>	
sq.m	
- With an area of 200 sq.m or more but less than 500	
sq.m	
<ul> <li>With an area of 200 sq.m or more but less than 1000</li> </ul>	
sq.m	
<ul> <li>With an area of 1000 sq.m or more.</li> </ul>	
Police Clearance Fee	
1. Police Inspection	P200.00
2. Documentary stamp	P30.00
Service Fee	
	P 75.00

On manufacturers, assemblers, re-packers, processors, brewers, distillers, rectifiers, and compounders or liquors, distilled spirits and wines or manufacturers of any article of commerce of whatever kind or nature. In accordance with the following schedule:

Amount of Gross Sales/Receipts for the Preceding	Amount of Tax per
Calendar Year	Annum
Less than 10,000	P217.80
10,000.00 or more but not less than 15,000.00	290.40
15,000.00 or more but not less than 20,000.00	398.64
20,000.00 or more but not less than 30,000.00	580.80
30,000.00 or more but not less than 40,000.00	871.20
40,000.00 or more but not less than 50,000.00	1,089.00
50,000.00 or more but not less than 75,000.00	1,742.40
75,000.00 or more but not less than 100,000.00	2,178.00
100,000.00 or more but not less than 150,000.00	2,904.00
150,000.00 or more but not less than 200,000.00	3,630.00
200,000.00 or more but not less than 300,000.00	5,082.00
300,000.00 or more but not less than 500,000.00	7,260.00
500,000.00 or more but not less than 750,000.00	10,560.00
750,000.00 or more but not less than 1,000,000.00	13,200.00
1,000,000.00 or more but less than 2,000,000.00	18,018.00
2,000,000.00 or more but less than 3,000,000.00	21,780.00
3,000,000.00 or more but less than 4,000,000.00	26,136.00
4,000,000.00 or more but less than 5,000,000.00	30,756.00
5,000,000.00 or more but less than 6,500,000.00	32,175.00
	at a rate of forty five
6,500,000.00 0r more	percent (45%) of one
	percent (1%)

On wholesalers, distributors, or dealers in any article of commence of whatever kind or nature in accordance with the following schedules:



Calendar Year         Annum           Less than 1,000         P 23.76           1,000.00 or more but less than 2,000.00         43.56           2,000.00 or more but less than 3,000.00         66.00           3,000.00 or more but less than 4,000.00         95.04           4,000.00 or more but less than 5,000.00         132.00           5,000.00 or more but less than 6,000.00         159.72           6,000.00 or more but less than 7,000.00         188.76           7,000.00 or more but less than 1,000.00         224.84           10,000.00 or more but less than 15,000.00         290.40           15,000.00 or more but less than 20,000.00         363.00           20,000.00 or more but less than 15,000.00         435.60           30,000.00 or more but less than 30,000.00         435.60           30,000.00 or more but less than 50,000.00         871.20           50,000.00 or more but less than 15,000.00         1,306.80           75,000.00 or more but less than 150,000.00         1,742.40           100,000.00 or more but less than 150,000.00         3,194.40           200,000.00 or more but less than 200,000.00         3,194.40           200,000.00 or more but less than 50,000.00         5,808.00           300,000.00 or more but less than 50,000.00         5,808.00           300,000.00 or more but less than 50	Amount of Cross Salos (Pacaints for the Proceeding	A mount of Tax por
Less than 1,000         P 23.76           1,000.00 or more but less than 2,000.00         43.56           2,000.00 or more but less than 3,000.00         66.00           3,000.00 or more but less than 4,000.00         95.04           4,000.00 or more but less than 5,000.00         132.00           5,000.00 or more but less than 6,000.00         159.72           6,000.00 or more but less than 7,000.00         188.76           7,000.00 or more but less than 7,000.00         217.80           8,000.00 or more but less than 10,000.00         224.84           10,000.00 or more but less than 10,000.00         290.40           15,000.00 or more but less than 10,000.00         363.00           20,000.00 or more but less than 30,000.00         363.00           20,000.00 or more but less than 50,000.00         363.00           20,000.00 or more but less than 50,000.00         871.20           50,000.00 or more but less than 150,000.00         1,306.80           75,000.00 or more but less than 150,000.00         1,742.40           100,000.00 or more but less than 200,000.00         3,468.40           150,000.00 or more but less than 300,000.00         3,808.00           300,000.00 or more but less than 150,000.00         3,808.00           300,000.00 or more but less than 300,000.00         3,808.00           300,	Amount of Gross Sales/Receipts for the Preceding	Amount of Tax per
1,000.00 or more but less than 2,000.00         43.56           2,000.00 or more but less than 3,000.00         66.00           3,000.00 or more but less than 4,000.00         95.04           4,000.00 or more but less than 5,000.00         132.00           5,000.00 or more but less than 6,000.00         159.72           6,000.00 or more but less than 7,000.00         188.76           7,000.00 or more but less than 7,000.00         217.80           8,000.00 or more but less than 10,000.00         224.84           10,000.00 or more but less than 10,000.00         290.40           15,000.00 or more but less than 20,000.00         363.00           20,000.00 or more but less than 30,000.00         363.00           20,000.00 or more but less than 30,000.00         435.60           30,000.00 or more but less than 75,000.00         1,306.80           75,000.00 or more but less than 150,000.00         1,742.40           100,000.00 or more but less than 100,000.00         3,194.40           200,000.00 or more but less than 500,000.00         5,808.00           300,000.00 or more but less than 750,000.00         5,808.00           300,000.00 or more but less than 1,000,000.00         1,616.00           1,000,000.00 or more but less than 1,000,000.00         4,356.00		
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4,000.00 or more but less than 5,000.00132.005,000.00 or more but less than 6,000.00159.726,000.00 or more but less than 7,000.00188.767,000.00 or more but less than 8,000.00217.808,000.00 or more but less than 10,000.00224.8410,000.00 or more but less than 15,000.00290.4015,000.00 or more but less than 20,000.00363.0020,000.00 or more but less than 30,000.00435.6030,000.00 or more but less than 40,000.00580.8040,000.00 or more but less than 75,000.001,306.8075,000.00 or more but less than 100,000.001,742.40100,000.00 or more but less than 200,000.003,194.40200,000.00 or more but less than 500,000.003,194.40200,000.00 or more but less than 500,000.003,194.40200,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 100,000.001,326.00300,000.00 or more but less than 100,000.004,356.00300,000.00 or more but less than 100,000.003,194.40200,000.00 or more but less than 100,000.001,320.00500,000.00 or more but less than 1,000,000.0011,616.001,000,000.00 or more but less than 750,000.0013,200.00750,000.00 or more but less than 1,000,000.0011,616.001,000,000.00 or more but less than 1,000,000.0013,200.004t a rate of sixty4t a rate of sixty		
5,000.00 or more but less than 6,000.00       159.72         6,000.00 or more but less than 7,000.00       188.76         7,000.00 or more but less than 8,000.00       217.80         8,000.00 or more but less than 10,000.00       224.84         10,000.00 or more but less than 10,000.00       290.40         15,000.00 or more but less than 20,000.00       363.00         20,000.00 or more but less than 30,000.00       363.00         20,000.00 or more but less than 30,000.00       363.00         20,000.00 or more but less than 30,000.00       363.00         20,000.00 or more but less than 75,000.00       1,306.80         75,000.00 or more but less than 100,000.00       1,742.40         100,000.00 or more but less than 100,000.00       3,194.40         200,000.00 or more but less than 500,000.00       3,194.40         200,000.00 or more but less than 500,000.00       5,808.00         300,000.00 or more but less than 75,000.00       1,356.00         300,000.00 or more but less than 200,000.00       5,808.00         500,000.00 or more but less than 75,000.00       1,616.00         100,000.00 or more but less than 75,000.00       1,616.00         1,000,000.00 or more but less than 75,000.00       13,200.00         750,000.00 or more but less than 1,000,000.00       13,200.00		
6,000.00 or more but less than 7,000.00       188.76         7,000.00 or more but less than 8,000.00       217.80         8,000.00 or more but less than 10,000.00       224.84         10,000.00 or more but less than 15,000.00       290.40         15,000.00 or more but less than 20,000.00       363.00         20,000.00 or more but less than 20,000.00       363.00         20,000.00 or more but less than 30,000.00       435.60         30,000.00 or more but less than 50,000.00       580.80         40,000.00 or more but less than 50,000.00       871.20         50,000.00 or more but less than 100,000.00       1,306.80         75,000.00 or more but less than 100,000.00       1,742.40         100,000.00 or more but less than 200,000.00       3,194.40         200,000.00 or more but less than 300,000.00       4,356.00         300,000.00 or more but less than 500,000.00       5,808.00         500,000.00 or more but less than 500,000.00       4,356.00         300,000.00 or more but less than 750,000.00       5,808.00         500,000.00 or more but less than 750,000.00       11,616.00         1,000,000.00 or more but less than 1,000,000.00       13,200.00         At a rate of sixty       At a rate of sixty		
7,000.00 or more but less than 8,000.00217.808,000.00 or more but less than 10,000.00224.8410,000.00 or more but less than 15,000.00290.4015,000.00 or more but less than 20,000.00363.0020,000.00 or more but less than 30,000.00435.6030,000.00 or more but less than 40,000.00580.8040,000.00 or more but less than 50,000.00871.2050,000.00 or more but less than 75,000.001,306.8075,000.00 or more but less than 100,000.002,468.40100,000.00 or more but less than 150,000.003,194.40200,000.00 or more but less than 50,000.005,808.00300,000.00 or more but less than 50,000.003,194.40200,000.00 or more but less than 50,000.004,356.00300,000.00 or more but less than 50,000.004,356.00300,000.00 or more but less than 50,000.004,356.00300,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 500,000.004,356.00300,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 500,000.0011,616.001,000,000.00 or more but less than 2,000,000.0013,200.00At a rate of sixtyAt a rate of sixty		
8,000.00 or more but less than 10,000.00         224.84           10,000.00 or more but less than 15,000.00         290.40           15,000.00 or more but less than 20,000.00         363.00           20,000.00 or more but less than 30,000.00         435.60           30,000.00 or more but less than 40,000.00         580.80           40,000.00 or more but less than 50,000.00         871.20           50,000.00 or more but less than 75,000.00         1,306.80           75,000.00 or more but less than 100,000.00         1,742.40           100,000.00 or more but less than 150,000.00         3,194.40           200,000.00 or more but less than 300,000.00         3,194.40           200,000.00 or more but less than 500,000.00         1,306.00           300,000.00 or more but less than 300,000.00         3,194.40           200,000.00 or more but less than 500,000.00         5,808.00           500,000.00 or more but less than 500,000.00         1,616.00           300,000.00 or more but less than 750,000.00         1,616.00           1,000,000.00 or more but less than 2,000,000.00         1,616.00           1,000,000.00 or more but less than 2,000,000.00         13,200.00		
10,000.00 or more but less than 15,000.00290.4015,000.00 or more but less than 20,000.00363.0020,000.00 or more but less than 30,000.00435.6030,000.00 or more but less than 40,000.00580.8040,000.00 or more but less than 50,000.00871.2050,000.00 or more but less than 75,000.001,306.8075,000.00 or more but less than 100,000.001,742.40100,000.00 or more but less than 150,000.002,468.40150,000.00 or more but less than 200,000.003,194.40200,000.00 or more but less than 300,000.005,808.00300,000.00 or more but less than 150,000.001,366.00300,000.00 or more but less than 200,000.003,194.40200,000.00 or more but less than 300,000.001,366.00300,000.00 or more but less than 300,000.004,356.00300,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 750,000.0011,616.001,000,000.00 or more but less than 2,000,000.0013,200.00At a rate of sixty4t a rate of sixty		
15,000.00 or more but less than 20,000.00363.0020,000.00 or more but less than 30,000.00435.6030,000.00 or more but less than 40,000.00580.8040,000.00 or more but less than 50,000.00871.2050,000.00 or more but less than 75,000.001,306.8075,000.00 or more but less than 100,000.001,742.40100,000.00 or more but less than 150,000.002,468.40150,000.00 or more but less than 200,000.003,194.40200,000.00 or more but less than 300,000.005,808.00300,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 500,000.0011,616.001,000,000.00 or more but less than 2,000,000.0013,200.00At a rate of sixtyAt a rate of sixty	8,000.00 or more but less than 10,000.00	224.84
20,000.00 or more but less than 30,000.00435.6030,000.00 or more but less than 40,000.00580.8040,000.00 or more but less than 50,000.00871.2050,000.00 or more but less than 75,000.001,306.8075,000.00 or more but less than 100,000.001,742.40100,000.00 or more but less than 150,000.002,468.40150,000.00 or more but less than 200,000.003,194.40200,000.00 or more but less than 300,000.004,356.00300,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 500,000.0011,616.001,000,000.00 or more but less than 1,000,000.0013,200.00At a rate of sixty	10,000.00 or more but less than 15,000.00	290.40
30,000.00 or more but less than 40,000.00580.8040,000.00 or more but less than 50,000.00871.2050,000.00 or more but less than 75,000.001,306.8075,000.00 or more but less than 100,000.001,742.40100,000.00 or more but less than 150,000.002,468.40150,000.00 or more but less than 200,000.003,194.40200,000.00 or more but less than 300,000.004,356.00300,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 750,000.0011,616.001,000,000.00 or more but less than 1,000,000.0013,200.00At a rate of sixtyAt a rate of sixty	15,000.00 or more but less than 20,000.00	363.00
40,000.00 or more but less than 50,000.00       871.20         50,000.00 or more but less than 75,000.00       1,306.80         75,000.00 or more but less than 100,000.00       1,742.40         100,000.00 or more but less than 150,000.00       2,468.40         150,000.00 or more but less than 200,000.00       3,194.40         200,000.00 or more but less than 300,000.00       4,356.00         300,000.00 or more but less than 500,000.00       5,808.00         500,000.00 or more but less than 750,000.00       1,616.00         1,000,000.00 or more but less than 2,000,000.00       13,200.00         At a rate of sixty       At a rate of sixty	20,000.00 or more but less than 30,000.00	435.60
50,000.00 or more but less than 75,000.001,306.8075,000.00 or more but less than 100,000.001,742.40100,000.00 or more but less than 150,000.002,468.40150,000.00 or more but less than 200,000.003,194.40200,000.00 or more but less than 300,000.004,356.00300,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 750,000.008,712.00750,000.00 or more but less than 1,000,000.0011,616.001,000,000.00 or more but less than 2,000,000.0013,200.00	30,000.00 or more but less than 40,000.00	580.80
75,000.00 or more but less than 100,000.00       1,742.40         100,000.00 or more but less than 150,000.00       2,468.40         150,000.00 or more but less than 200,000.00       3,194.40         200,000.00 or more but less than 300,000.00       4,356.00         300,000.00 or more but less than 500,000.00       5,808.00         500,000.00 or more but less than 750,000.00       11,616.00         1,000,000.00 or more but less than 1,000,000.00       11,616.00         1,000,000.00 or more but less than 2,000,000.00       13,200.00	40,000.00 or more but less than 50,000.00	871.20
100,000.00 or more but less than 150,000.002,468.40150,000.00 or more but less than 200,000.003,194.40200,000.00 or more but less than 300,000.004,356.00300,000.00 or more but less than 500,000.005,808.00500,000.00 or more but less than 750,000.008,712.00750,000.00 or more but less than 1,000,000.0011,616.001,000,000.00 or more but less than 2,000,000.0013,200.00At a rate of sixty	50,000.00 or more but less than 75,000.00	1,306.80
150,000.00 or more but less than 200,000.00       3,194.40         200,000.00 or more but less than 300,000.00       4,356.00         300,000.00 or more but less than 500,000.00       5,808.00         500,000.00 or more but less than 750,000.00       8,712.00         750,000.00 or more but less than 1,000,000.00       11,616.00         1,000,000.00 or more but less than 2,000,000.00       13,200.00         At a rate of sixty       At a rate of sixty	75,000.00 or more but less than 100,000.00	1,742.40
200,000.00 or more but less than 300,000.00       4,356.00         300,000.00 or more but less than 500,000.00       5,808.00         500,000.00 or more but less than 750,000.00       8,712.00         750,000.00 or more but less than 1,000,000.00       11,616.00         1,000,000.00 or more but less than 2,000,000.00       13,200.00         At a rate of sixty       At a rate of sixty	100,000.00 or more but less than 150,000.00	2,468.40
300,000.00 or more but less than 500,000.00       5,808.00         500,000.00 or more but less than 750,000.00       8,712.00         750,000.00 or more but less than 1,000,000.00       11,616.00         1,000,000.00 or more but less than 2,000,000.00       13,200.00         At a rate of sixty	150,000.00 or more but less than 200,000.00	3,194.40
500,000.00 or more but less than 750,000.00       8,712.00         750,000.00 or more but less than 1,000,000.00       11,616.00         1,000,000.00 or more but less than 2,000,000.00       13,200.00         At a rate of sixty	200,000.00 or more but less than 300,000.00	4,356.00
500,000.00 or more but less than 750,000.00       8,712.00         750,000.00 or more but less than 1,000,000.00       11,616.00         1,000,000.00 or more but less than 2,000,000.00       13,200.00         At a rate of sixty	300,000.00 or more but less than 500,000.00	5,808.00
1,000,000.00 or more but less than 2,000,000.00 13,200.00 At a rate of sixty		8,712.00
1,000,000.00 or more but less than 2,000,000.00 13,200.00 At a rate of sixty		
At a rate of sixty		
	2,000,000.00 or more	percent (60%) of one
percent (1%)	,,	,

On contractors and other independent contractors in accordance with the following schedule.

Amount of Gross Sales/Receipts for the Preceding	Amount of Tax per
Calendar Year	Annum
Less than 5,000.00	P 36.30
5,000.00 or more but less than 10,000.00	81.31
10,000.00 or more but less than 15,000.00	134.94
15,000.00 or more but less than 20,000.00	217.80
20,000.00 or more but less than 30,000.00	363.00
30,000.00 or more but less than 40,000.00	508.20
40,000.00 or more but less than 50,000.00	726.00
50,000.00 or more but less than 75,000.00	1,161.20
75,000.00 or more but less than 100,000.00	1,742.40
100,000.00 or more but less than 150,000.00	2,613.60
150,000.00 or more but less than 200,000.00	3,484.80
200,000.00 or more but less than 250,000.00	4,791.60
250,000.00 or more but less than 300,000.00	6,098.40
300,000.00 or more but less than 400,000.00	8,131.20



400,000.00 or more but less than 500,000.00	10,890.00
500,000.00 or more but less than 750,000.00	12,210.00
750,000.00 or more but less than 1,000,000.00	13,530.00
1,000,000.00 or more but not less than 2,000,000.00	15,180.00
	At a rate of sixty
2,000,000.00 or more	percent (70% of one
	percent (1%)

On business hereunder enumerated, the graduated tax rates are hereby imposed:

1. Cafes, cafeterias, ice cream and other refreshment parlors, restaurants, soda fountain bars, carinderias or food caterers;

2. Amusement places, including places wherein customers thereof actively participate without making bets or wagers, including but not limited to night clubs, or day clubs, cocktail lounges, cabarets or dance halls, karaoke bars, skating rings, bath houses, swimming pools, exclusive clubs, resorts and other similar places, billiard and pool tables, bowling alleys, circuses, carnivals, merrygo-rounds, roller coasters, ferris wheels, swings, shooting galleries, and other similar contrivances, theaters and cinema houses, boxing stadia, race tracks, cockpits and similar establishments.

3. Commission agents

4. Lessors, dealers, brokers of real estates

5. On travel agencies and travel agents

6. On boarding houses, pension houses, motels, apartments, apartelles, and condominiums

- 7. Subdivision owners/ Private cemeteries and memorial parks
- 8. Privately-owned markets;

9. Hospitals, medical clinics, dental clinics, therapeutic clinics, medical laboratories, dental laboratories;

- 10. Operators of Cable Network System
- 11. Operator of computer services establishment
- 12. General consultancy services

13. All other similar activities consisting essentially of the sales of services for a fee.

Amount of Gross Sales/Receipts for the Preceding	Amount of Tax per
Calendar Year	Annum
Less than 5,000	P 36.30
5,000.00 or more but less than 10,000.00	81.31
10,000.00 or more but less than 15,000.00	137.94
15,000.00 or more but less than 20,000.00	217.80
20,000.00 or more but less than 30,000.00	363.00



30,000.00 or more but less than 40,000.00	508.20
40,000.00 or more but less than 50,000.00	726.00
50,000.00 or more but less than 75,000.00	1,161.60
75,000.00 or more but less than 100,000.00	1,742.40
100,000.00 or more but less than 150,000.00	2,613.60
150,000.00 or more but less than 200,000.00	3,484.80
200,000.00 or more but less than 250,000.00	4,791.60
250,000.00 or more but less than 300,000.00	6,098.40
300,000.00 or more but less than 400,000.00	8,131.20
400,000.00 or more but less than 500,000.00	10,980.00
500,000.00 or more but less than 750,000.00	12,210.00
750,000.00 or more but less than 1,000,000.00	13,530.00
1,000,000.00 or more but not less than 2,000,000.00	15,180.00
	At a rate of sixty
2,000,000.00 or more	percent (60% of one
	percent (1%)

On Traffic Violations (Municipal Ordinance Number 5, Series of 2014)

Driving without License	P 300.00
Unregistered Vehicle	P 1,000.00
No Helmet	P 500.00
No Side Mirrors	P 300.00
Driving While Using Cellphone	P 300.00
Motor Vehicle Without Stop Light	P 300.00
Motor Vehicle With Disconnected Muffler	P 500.00
Motor Vehicle Without the Prescribed Horns	P 300.00
Motor Vehicle with Metallic Tires	P 1,000.00
Driving Under the Influence of Liquor and Narcotic	P 1,000.00
Drugs	

### 3. ISSUANCE OF CERTIFICATE OF BUSINESS CLOSURE

As stated in the Local Revenue Code of San Ildefonso, Ilocos Sur, the Business that retires/stopped from operation, must request for the issuance of certificate of business closure and settle the applicable fees and charges.

Office or Division: ML			MUNICIPAL TREASURER'S OFFICE			
Classification:		SIMPLE				
Type of Transaction	•	G2C – (	Governr	nent to Client		
Who may avail:	Who may avail: Busine			usiness owners		
CHECKLIST OF REQU	JIREMENTS		WHERE TO SECURE			
1. Barangay Certific	cation (CEASED		Barangay where the business is			
OPERATION)			located			
2. Declaration of Gross Sales			Business Owner			
CLIENT STEPS AGENCY		FEES TO	BE	PROCESSIN	PERSON	
CLIEINI JIEFJ	ACTIONS	PAID		G TIME	RESPONSIBLE	



2. Payment 2.1 Receive payment ,Issue Official Receipt and Certification.	5 minutes	Batuyong Revenue Collection Clerk II Elizabeth Ramos Municipal Treasurer
		Revenue Collection Clerk
completethefee P70.00requiremedocumentsDocumentarnts to the,verify at Listy Stamp-BPLOand assessedP30.00thethethe	5 minutes 10 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O.

#### 4. COLLECTION OF BUILDING PERMIT/FRANCHISE OF TRICYCLE/CIVIL REGISTRATION/CERTIFICATION/LABORATORY FEES/CLEARANCES/ REGISTRATION/TRANSFER OF LARGE CATTLE AND OTHER SERVICE INCOME/CITATION TICKET FOR TRAFFIC VIOLATIONS

Office or Division: TREASURY			OFFICE		
Classification:		SIMPLE			
Type of Transaction: G2C - G			G2C – Government to Client		
Who may avail:		The Gene	ne General Public		
CHECKLIST OF REG	UIREMENTS		WHERE TO SECURE		
Order of payment			Different Offices concern		
Citation Ticket			PNP		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID		PROCESSI NG TIME	PERSON RESPONSIBLE



		1		
1. Present order of payment/ Citation Ticket	1. Receive order of payment	Refer to Local Revenue Code 2022 Municipal Ordinance Number 5,Series of 2014	2 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III
2. Pay and Receive official receipt of fees and charges paid	<ul> <li>2.1Receive payment and Issue official receipt</li> <li>2.1 Advise client to present the OR to the Offices concern</li> </ul>	None	5 minutes	Alvin O. Batuyong Revenue Collection Clerk II Elizabeth Ramos Municipal Treasurer
TOTAL:			7 Minutes	

### 3. COLLECTION AND ISSUANCE OF REAL PROPERTY TAX RECEIPTS

Real property taxes are being collected annually on real property such as land, building, machinery and other improvement. Local Government Code of 1991 sec.232.

Office or Division	า:	TREASU	TREASURY OFFICE			
Classification:		SIMPLE				
Type of Transact	ion:	G2C – C	G2C – Government to Client			
Who may avail:		All Real Property Owners				
CHECKLIST OF RE	QUIREM	NENTS WHERE TO SECURE				
Latest Official Re	eceipt of	Real Pro	perty Taxes	Μu	nicipal Assessc	or's Office
and updated as	sessed v	alue of tl	he property			
CLIENT STEP	AGENC ACTION		FEES TO BE PAID		PROCESSIN G TIME	PERSON RESPONSIBLE



TOTAL			60 minutes	
2. Pay the correspondin g tax	2.1Receive payment and issue Official Receipt		5 minutes	
Receipt/Tax Declaration	Official Receipt of Real Property Tax and verify records from the Real property Tax Account Register	for Basic and additional 1% of the assessed value for the Special Education Fund. Less 20% discount if payments made before January, 10% discount if payments made within Jan 1-March 31, a penalty of 2% every month of payments made beyond March 31.	35 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong Revenue Collection Clerk II Elizabeth Ramos Municipal Treasurer
1. Present latest Official	1.1 Verify latest	1% of the assessed value	20 minutes	



# 4. ISSUANCE OF REAL PROTERTY TAX CERTIFICATION (5 YEARS) – NON-DELINQUENT OF REAL PROPERTY TAX

Office or Division:			FFICE			
Classification:		SIMPLE				
Type of Transaction	•	G2C – Gove			ent	
Who may avail:		All Real Prop	perty C			
CHECKLIST OF REQU						
Tax Declaration				Assesso	or's Office	
Latest Real Property	/ Tax	Receipt		Client		
CLIENT STEP	AGE ACTI	-	FEES T PAID	IO BE	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Present Tax Declaration Number/Latest Real Property Tax Receipt	th ha ba na ha Re pr	1 Verify if le client as no utstanding alance , if ot client as to pay eal coperty Tax or the npaid years	None	2	20 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection
2. Payment	2. pi O Re	1 Receive ayment nd issue fficial eceipt	Secre fee 30.00 Docu ary st	iment amp	10 Minutes	Clerk III Alvin O. Batuyong Revenue Collection Clerk II Elizabeth Ramos Municipal Treasurer
3. Receive Certification	a	1 Prepare nd Issue ertification	None	•	20 minutes	
TOTAL			P 80.0	00	50 minutes	



# **MUNICIPAL ENGINEERING OFFICE**

External Services



# 1. ISSUANCE OF PROGRAM OF WORKS FOR INFRASTRUCTURE PROJECTS

Public, Barangays Units, Government Agencies and other Accredited Sectoral Groups requesting a Development or project in their respective jurisdiction within the municipality.

Α.							
Office or Division:	Municipal Engineering	Municipal Engineering Office (MEO)					
Classification:	Highly Technical						
Type of	G2G Government to	G2G Government to Government					
Transaction:							
Who may avail		LGU & Barangay Units					
CHECKLIST OF	REQUIRMENTS		WHERE TO SE	CURE			
FOR LGU BARANGAY	FUNDED PROJECTS	Municipa	l Budget Offic	ce			
1. Budget/Appr	opriation	Office of	the Sanggun	iang Bayan			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE			
FOR LGU FUNDED MAJOR PROJECTS 1. Submit Budget/PPMP	<ol> <li>Receive and review the completeness of the requirements</li> </ol>	None	30 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer			
	1.2 Review PPMP	None	15 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer			
	1.3 Inspection of Propose site (for Data)	None	1 day	Engr. Mikee Jenine C. Ricod Municipal Engineer			
	1.4 Prepare Detailed Engineering and Designs (DED) Plans, Cost Estimates, POW & Specifications	None	14 days	Engr. Mikee Jenine C. Ricod Municipal Engineer			



2. Receive Program of Work	2. Issue Program of Work	None	5 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer
TOTAL		None	15 days and 50 min.	

В.						
Office or Division:	Municipal Engineering Office (MEO)					
Classification:	Complex	Complex				
Type of	G2G Government to	Governme	nt			
Transaction:						
Who may avail	LGU & Barangay Unit	<u>s</u>				
CHECKLIST OF	REQUIRMENTS		WHERE TO SE	CURE		
FOR LGU FUNDED PRC	JECTS (Municipal		l Budget Offic			
Level)		Office of	the Sanggun	iang Bayan		
FOR LGU BARANGAY 1. Project Propose 2. Annual/Supple 3. Project Procur	Iget/Appropriation ARANGAY FUNDED PROJECTS ect Proposal nual/Supplemental Budget ect Procurement nagement Plan (PPMP)		Concerned Barangay			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE		
1. Submit requirements	1.1 Receive the requirements	None	2 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer		
	1.2 Review the PPMP	None	15 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer		
	1.3 Inspect the Proposed site	None	1 day	Engr. Mikee Jenine C. Ricod Municipal Engineer		



	1.4 Prepare Cost Estimate, Drawings & Specifications	None	7 days	Engr. Mikee Jenine C. Ricod Municipal Engineer
2. Receive Program of Work	2. Issue Program of Work	None	5 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer
TOTAL		None	8 days and 22 minutes	

# 2. REVIEW OF SUBMITTED STATEMENT OF WORK ACCOMPLISHMENT & ISSUANCE OF INSPECTION REPORT (IR) FOR BILLING OF CONTRACTS

Progress payment can be made provided that the Contractor submits Progress Billing or request for payment for work accomplished.

Office or Division:	Municipal Engineering	Municipal Engineering Office (MEO)			
Classification:	Simple	5	1		
Type of	G2C – Gov't to Client	ł			
Transaction:					
Who may avail	Contractors				
CHECKLIST OF					
<ol> <li>Letter of Reque</li> <li>Statement of W Accomplishme</li> <li>Project Folder of</li> <li>PICTURES</li> </ol>	st for InspectionContractorJorkContractorContractorContractor/BAC				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSI NG TIME	PERSON RESPONSIBLE	
1. Submit Requirement s	1.1 Receive and Review documents	None	30 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer	
2. Accompany the Municipal Engineer in the Inspection	2.1 Inspect assess & Evaluate accomplishment with respect to POW, Plans, & Specifications.	None	4 hours	Engr. Mikee Jenine C. Ricod Municipal Engineer	



				Project Monitoring Committee
3. Prepare SWA	3.1 Review the submitted SWA and Prepare Inspection Report with respect to BID Proposal	None	2 hours	Engr. Mikee Jenine C. Ricod Municipal Engineer
	3.2 Submit SWA, IR & Submitted requirements to Mayor's Office for review & Approval	None	5 mins	Engr. Mikee Jenine C. Ricod Municipal Engineer
т	OTAL		6 hours & 35 minutes	



# OFFICE OF THE BUILDING OFFICIAL External Services



## 1. ISSUANCE OF BUILDING PERMIT AND OTHER RELATED PERMITS

Every Building, Tenement or Structure to be built/erected/constructed, altered/repaired or demolished, must be covered by a corresponding Building Permit to ensure compliance to the Standards, specifications and Requirements of the Provisions of the National Building Code (PD 1096) and its IRR.

Office or Division:	Municipal Enginee	ring Office		
Classification:	Simple			
Type of Transaction:	G2C – Governmen	t to Client		
Who may avail:	General Public			
CHECKLIST OF RE	QUIREMENTS		WHERE TO SEC	CURE
<ol> <li>Duly accomplished and notarized (Unified Application form for Building Permit) 4 Copies</li> </ol>		• Muni	cipal Enginee	ring Office
<ol> <li>Locational Clearand</li> <li>Plans, Bill of Quantity Estimate (5 Sets), Spectructural Analysis (2 and other document Clearances, Official duly signed and sea corresponding issuin</li> </ol>	y and Cost ecifications, – Storey and up) Its (Certifications, Receipt, ect.) led by the	<ul> <li>MPDC Office and Municipal Assessor's Office</li> <li>Owner/Practicing Professionals (Architect/Engineer)</li> </ul>		Professionals
4. Fire Safety Evaluatio	on Clearance	Bureau of Fire Protection (BFP)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Submit Five (5) sets of requirements , Received Endorsement letter to BFP and Order of Payment	1. Receive and Check for completen ess of documents	None	15 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer
	1.2 If complet e, Prepare endorse ment letter and	None	10 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer
	provide copy to the client	Annex-A of the Revised IRR of the	30 minutes	



	1.3 Review Docume nts , assess fees, prepare order of payment	National Building Code of the Philippine (PD 1096)		Engr. Mikee Jenine C. Ricod Municipal Engineer
2. Submit Documents from BFP, received order of payment & Pay Corresponding Fees	2.1 Receive Documents from BFP, Issue Order of Payment ,Prepare Building Permit		10 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer
	2.2 Receive payment & Issue OR	As per Order of Payment		Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong Revenue Collection Clerk II
3. Present OR and Receive Building Permit	3. Issue building permit	None	5 minutes	Engr. Mikee Jenine Ricod Municipal Engineer
TOTAL			1 hour and 10 minutes	

New schedule of fees & other charges of the revised table of fees (Annex A) IRR of the National Building code of the Philippines



## 2. ISSUANCE OF CERTIFICATE OF OCCUPANCY/USE

Any new rehabilitated, improved, repaired building structure or edifice to be habitable should be ensured to conform with the submitted plans and specifications.

Office or Division:	Municipal Engineeri	ng Office		
Classification:	Simple			
Type of Transaction:	G2C – Government	to Client		
Who may avail:	General Public			
REQUIREN	ENTS		WHERE TO SECU	JRE
<ol> <li>Unified Application form for Certified of Occupancy (4 copies)</li> </ol>		Office	e of the Munic	ipal Engineer
<ol> <li>Certificate of Electric Copy)</li> </ol>		Office	e of the Munic	ipal Engineer
<ol> <li>Certificate of Compl No. B-10) (1 Copy)</li> </ol>	etion (NBC Form	Cont	ractor/Owner	
<ol> <li>As-built Plan (1 Copy</li> <li>Fire Safety Inspection (FSIC)(1 Copy)</li> </ol>		<ul><li>Conti</li><li>BFP</li></ul>	ractor/Owner	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit application form & documentary requirements	1. Receive application form & documents, If complete prepare & give the client a copy of the endorsement and building permit copy for BFP.	None	30 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer
2. Present FSIC and Receive Order of payment	2. Receive FSIC Copy, Assess fees and Issue Order of Payment	Refer to the Annex A of the Revised IRR of the National Building Code of the Philippine s (PD 1096)	15 minutes	



3. Present OR and Receive Certificate of Occupancy	3. Prepare and Issue Certificate of Occupancy	None	5 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer
TOTAL			55 minutes	

### 3. ISSUANCE OF ANNUAL INSPECTION CERTIFICATE

For purposes of Business Permit Renewal an annual inspection of the Subject Building is necessary to check and monitor their structural and Electrical integrity.

Office or Division:	Municipal Engineer	ing Office			
Classification:	Simple	Simple			
Type of Transaction:	G2C – Governmen	t to Client			
Who may avail:	Commercial Establishment/Structure owners (must), Residential Building (Optional)				
REQUIREA	MENTS	,	WHERE TO SECU	JRE	
<ol> <li>Business Permit</li> <li>As-built Plan</li> <li>Letter Request for In</li> </ol>	spection	<ul><li>BPLO</li><li>Owne</li><li>Owne</li></ul>			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit Requirements	<ul><li>1.1 Receive documents</li><li>1.2 Conduct</li></ul>	None	2 Minutes 4 hours	Engr. Mikee Jenine C. Ricod Municipal Engineer	
	Ocular Inspection	None	4110013	Ligineer	
2. Receive Order of Payment	2. Prepare Inspection Report, Assess fees and Issue Order of Payment	Refer to the Annex A of the Revised IRR of the National Building Code of the Philippines (PD 1096)	30 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer	
3. Present OR and received	4. Prepare and Issue Annual	None	5 minutes	Engr. Mikee Jenine C. Ricod	



Inspection Certificate	Inspection Certificate		Municipal Engineer
	TOTAL	4 hours and 37 minutes	

## 4. ISSUANCE OF SIGN PERMIT

Before any business advertisement (Sign boards, streamers, banners, directional) could be installed, sign permit is necessary to ensure safety to all concerned and local and national guidelines are followed and conformed.

		_			
Office or Division:	Municipal Engineering Office				
Classification:	Simple				
Type of Transaction:	G2C – Government	to Client			
Who may avail:	General Public	-			
REQUIREN	<b>NENTS</b>		WHERE TO SEC	URE	
<ol> <li>Plans, Bill of Quantities, Cost Estimate, Structural Analysis (for Framed, Stand alone, guyed signboard/billboard) duly signed and sealed by the corresponding issuing professional (5 Sets)</li> </ol>		<ul> <li>Practicing Professional (Architect, Engineer)/Owner</li> </ul>			
2. Business Permit (for a	commercial)	• BPLC	BPLO/Owner		
3 Mayor's Permit (for Social)		<ul> <li>Mayor's Office</li> </ul>			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit requirements and receive Order of Payment	<ol> <li>Receive and evaluate documents,</li> </ol>	None	15 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer	
	1.2 Assess fees and prepare Order of Payment	1.00/Sq. 100/day of posting	15 minutes	2.19.1001	
2. Present OR and receive approved Sign Permit	3. Prepare and Issue Sign Permit	None	2 minutes	Engr. Mikee Jenine C. Ricod Municipal Engineer	
	TOTAL		32 minutes		



# OFFICE OF THE MUNICIPAL HEALTH OFFICER

**External Services** 



#### 1. OUT-PATIENT DEPARTMENT-MEDICAL CONSULTATION SERVICES

This service caters to all residents of San Ildefonso, Ilocos Sur who have medical problems manageable in a primary health care setting.

Office or Division:	MUNICIPAL HEALTH OFFICE	MUNICIPAL HEALTH OFFICE			
Classification:	Simple				
Type of Transaction:	G2C – Government to Citiz	en			
Who may avail:	Residents of San Ildefonso,	llocos Sur			
CHECKLIST OF REQUIR	EMENTS	ENTS WHERE TO SECURE			
<ol> <li>Referral slip (if the second se</li></ol>	MDR	Local Hea	Health Stations Ith Insurance Off		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present referral slip from BHS, PhilHealth ID, and or any valid ID	<ol> <li>1.1 Receive referral slip then retrieve or create electronic Individual treatment Record (e-ITR)</li> </ol>	None	10 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego,	
2. Provide necessary data for history taking.	<ul> <li>2.1 Interview client for medical history</li> <li>2.2 Get vital signs and other relevant findings and record on e-ITR.</li> <li>2.3 Refer client to the Municipal Health Officer.</li> </ul>	None	15 minutes	RM. RN Nurse I Gonzales, RM Jovelyn Talvo Rin Midwife II	
3. Proceed to medical consultation room.	<ul> <li>3.1. Verify medical history of client.</li> <li>3.2. Do complete physical examination.</li> <li>3.3. Refer for any laboratory examination, chest X-ray, CT-Scan, Ultrasound, as needed</li> <li>3.4 Diagnose and discuss treatment plan with client.</li> <li>3.5. Prescribe appropriate medicine and give medical advice.</li> <li>3.5 Practice referral system (for patients who needs hospitalization of specialty services)</li> </ul>	None	15 minutes	Novelyn A. Rafanan, MD Municipal Health Officer	



	utilizing the Service Delivery Network			
4. Receive the medicines provided by the pharmacist.	4.1. Refer client to pharmacist or assigned personnel for provision of medicines. (If available – following the Philippine Drug Formulary)	None	3 minutes	Melody Gonzales, RM Jovelyn Rin Midwife II
	TOTAL		43 minutes	

#### 2. NATIONAL IMMUNIZATION PROGRAM SERVICES

This service provides vaccination for children 0 to 12 months old. Vaccination gives protection against vaccine preventable diseases. The vaccines given to infants are as follows: BCG, Hepatitis B, OPV, IPV, Pentavalent Vaccine, PCV, Measles, Mumps, Rubella.

The Rural Health Unit (RHU) also immunizes (Tetanus Toxoid) pregnant mothers to prevent the occurrence of Tetanus Neonatorum in infants.

Office or Division:	MUNICIPAL HEALTH OFF	ICE / BARAN	GAY HEALTH STAT	
Classification:	Simple	ICL/ DAKAIN		
Type of Transaction:	G2C – Government to C	<i>`itizon</i>		
Who may avail:	0-12 months old and Pregnant Residents of San Ildefonso, Ilocos Sur			
-				
CHECKLIST OF REQUIREM	ENTS	WHERE TO		
1. Referral slip		Barangay H	lealth Stations (BH	S)
2. Mother-Baby Booklet/ I	nmunization Booklet	BHS during the succeedi	first month of the ling visits	oaby: Client on
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>(New Patient) Provide necessary data for electronic Individual Treatment Record (e- ITR) (Follow up) Present immunization booklet.</li> <li>2. Proceed to the medical</li> </ol>	(New Patient) 1.1 Create electronic medical record. (Follow Up) 1.2 Check immunization card history for follow up. 2.1 Get vital signs	None	5 minutes 5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN
consultation room	2.1 Get vital signs and anthropometric measurements of client. (Weight, Height, circumference of the chest, abdomen, head) 2.2 Do physical examination.	None	Jimmoles	Nurse I Melody Gonzales, RM Jovelyn T. Rin Midwife II



	2.3 Provide health education to parent/guardian.		
3. Proceed to vaccination room.	3.1 Administer appropriate vaccine	None	2 minutes
4. Listen to the instructions and next schedule of immunization	<ul> <li>4.1 Give parent/guardian or pregnant mother post-immunization instructions.</li> <li>4.2 Inform schedule of next immunization.</li> </ul>	None	5 minutes
TOTAL	or next minorization.	None	17 minutes

### 3. PRENATAL CARE SERVICES / MATERNAL CARE SERVICES

This service caters to all pregnant women in San Ildefonso, Ilocos Sur who do not belong to the high-risk group (i.e., primigravida, below 18 years old, more than gravida 4, with existing comorbidity). Vaccination of Tetanus Toxoid and supplementation of Ferrous Sulfate and Calcium Carbonate are provided. At least four prenatal check-ups are done to each pregnant women.

	MUNICIPAL HEALTH OFFIC	CE – SAN II	DEFONSO BIRTH	NG HOME
Office or Division:	FACILITY			
Classification:	Simple	Simple		
Type of Transaction:	G2C – Government to Cit	G2C – Government to Citizen		
Who may avail:	Pregnant women of San II	defonso, Il	ocos Sur	
CHECKLIST OF REQUIREMEN	ITS	WHERE T	O SECURE	
1. Referral slip		Barangay Health Stations (BHS)		BHS)
2. Prenatal Book (Mother-Ba	by Booklet)	BHS during first visit:		
		Client on the succeeding visits		its
3. Laboratory results		Client (an	y licensed labora	tory facility)
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE



		1	1	
1. (New Patient) Provide necessary data for electronic Individual Treatment Record (e-ITR) (Follow up) Present Prenatal booklet.	<ul> <li>(New Patient)</li> <li>1.1 Create electronic medical record (Follow up)</li> <li>1.2 Check Prenatal Booklet history</li> <li>1.3 Obtain vital signs and fetal heart tone and fundic height.</li> <li>1.4 Do physical examination and Leopold's Maneuver for 28 weeks and above.</li> </ul>	None	4 minutes 5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I Melody Gonzales, RM Jovelyn T. Rin, RM Midwife II
2. Proceed to Health Education Corner	<ul> <li>2.1 Provide health education on proper nutrition and maternal care to client.</li> <li>2.2 Request for laboratory and imaging studies per routine and obstetric guidelines.</li> <li>2.3 Advise client on the schedule of next</li> </ul>	None	5 minutes 1 minutes 2 minutes	
	prenatal check-up. If client is classified as high risk, issue a referral slip and refer patient to a higher facility			
3. Get medicine (if there is any)	3.1 Refer client to assigned personnel for dispensing of drugs/medicine.(if there is any)	None	3 minutes	
4. Get medicine (if there is any)	3.1 Refer client to assigned personnel for dispensing of drugs/medicine.(if there is any)	None	3 minutes	

23 minutes

None

TOTAL



PRENATAL CARE SERVICES: BARANGAY HEALTH STATIONS (Busiing and Bungro BHS) (32 weeks and below (low risk) 1. Provide necessary data for history taking.	<ul> <li>1.1. Acquire referral slip from BHS</li> <li>1.2. Interview client for medical and OB-Gyne history</li> <li>1.3.Check laboratory results for abnormality</li> </ul>	None	5 minutes	Novelyn A. Rafanan, MD Municipal Health Officer
2. Proceed to the examination room	<ul> <li>2.1 Obtain vital signs.</li> <li>2.2 Do physical and internal examination and Leopold's Maneuver.</li> <li>2.3 Get Fetal Heart tone/Fundic Height</li> </ul>	None	20 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I Melody Gonzales, RM Jovelyn T. RIn
3. Listen to the health education provided	<ul> <li>3.1 Provide health education on proper nutrition and maternal care to client.</li> <li>3.2. Refer client to assigned personnel for dispensing of drugs/medicine (if there is any)</li> </ul>	None	5 minutes	Midwife II
4. Proceed to the personnel for issuance of drugs/medicines (if there is any)	<ul> <li>4.1 Dispense prescribed medicine, if available.</li> <li>4.2 Advise client on the schedule of next prenatal check-up.</li> <li>*If client is classified as high risk, issue a referral slip and refer patient to a higher facility</li> </ul>	None	2 minutes	
	TOTAL	None	32 minutes	



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
MATERNAL CARE SERVICES: LABOR AND DELIVERY				Novelyn A. Rafanan, MD Municipal Health Officer
<ol> <li>Go to San Ildefonso Birthing Home Facility once with signs of labor or with warning signs</li> </ol>	<ol> <li>1.1 Receive client and obtain vital signs.</li> <li>1.2 Process admission electronically.</li> </ol>	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I
2. Proceed to the delivery room	BEFORE DELIVERY: 2.1 If in labor, place client in labor room. 2.2 Inform the Municipal Health Officer for physician's orders.	None	5 minutes	Melody Gonzales, RM Jovelyn T. Rin Midwife II
3. Deliver the baby	<ul> <li>3.1 Monitor the patient through the use of fetal doppler and do labor watch.</li> <li>3.2 Transfer client to delivery room once fully dilated</li> <li>3.3 Facilitate normal spontaneous delivery.</li> </ul>	None	18 hours	Novelyn A. Rafanan, MD Municipal Health Officer Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I Melody Gonzales, RM Jovelyn T. RIn Midwife II
4. Undergo taking of vital signs and monitoring for bleeding, hypotension/ hypertension	AFTER DELIVERY: POSTPARTUM CLIENT 4.1 Obtain vital signs 4.2 Monitor for bleeding, hypo/hypertension 4.3 Give appropriate post-partum medications 4.4 Provide post- partum care	None	2 hours	



	NEWBORN5.1 Provide essential newborn care.a) Immediate and thorough drying b.) early skin-to-skin contactC) Properly timed cord clamping d.) Non-separation of new born from mother and initiation of breastfeeding5.2 Keep new born thermo-regulated.5.3 Obtain newborn's anthropometric measurements and vital signs.5.4 Administer BCG, Hepatitis B vaccine and Erythromycin ointment to newborn.5.5 Transfer client and newborn to recovery room.5.6 Encourage	None	20 minutes	Novelyn A. Rafanan, MD Municipal Health Officer Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I Melody Gonzales, RM Jovelyn T. RIn Midwife II
6. Fill out and submit PhilHealth requirements.	breastfeeding 6.1 Accept completed PhilHealth requirements and file for reimbursement.	None	15 minutes	Pureza F. Bajo, RN Medical Clerk/ PhilHealth Officer
7. Hand over newborn for Newborn Screening Test before discharge (24 hours after birth).	<ul> <li>7.1 Carry newborn and erform Newborn Screening Test.</li> <li>7.2 Provide health education and discharge instructions on home medications and newborn care.</li> </ul>	None	15 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I Melody Gonzales, RM Jovelyn T. Rin Midwife II
	TOTAL	None	21 hours	
			1	1



#### 4. FAMILY PLANNING SERVICES (RESPONSIBLE PARENTHOOD AND REPRODUCTIVE HEALTH SERVICES)

This program caters to residents of San Ildefonso, Ilocos Sur who are of reproductive age, who wanted to have birth spacing to control or limit the number of children that they will have.

The following services are being offered under this program:

- Basic Family Planning Education
- Provision of Family Planning Commodities
- Information on Family Planning Methods
- Health Education (especially regarding examinations/ tests needed by clients relative to the family planning method chosen; and medical management of problems resulting from the method use)

Office or Division:	MUNICIPAL HEALTH OFFIC		(Haalth Stations		
		L/ burungu;			
Classification:	Simple	· · · · · · · · · · · · · · · · · · ·			
Type of Transaction:	G2C – Government to Cit	tizen	izen		
Who may avail:	Residents of San Ildefonso	, Ilocos Sur			
CHECKLIST OF REQUIREM	IENTS	WHERE TO SECURE			
1. Referral slip if for evalu	uation in RHU	Barangay Health Stations (BHS)			
2. Family Planning Card (f method user)	or current family planning	Client	Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
<ol> <li>Present referral slip from BHS (if available) and Family Planning Card (for current user)</li> <li>Provide the necessary information.</li> </ol>	<ul> <li>1.1 Receive referral slip then retrieve or create of electronic medical record.</li> <li>2.1 Interview client for history taking.</li> <li>2.2 Obtain vital signs.</li> <li>2.3 Do physical examination.</li> <li>2.4 Provide health education on available family planning methods.</li> </ul>	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I Melody Gonzales, RM Jovelyn T. Rin Midwife II	
3. Choose desired family planning method.	<ul> <li>3.1</li> <li>Administer/provide chosen family planning method.</li> <li>3.2 Advise client for schedule of next appointment.</li> </ul>	None	10 minutes		
	TOTAL	None	25 minutes		



#### 5. DENTAL HEALTH PROGRAM SERVICES

This service is available to pre-school and school-age children, pregnant mothers and other residents of San Ildefonso, Ilocos Sur to prevent and treat dental diseases, gum disorders, consultation and extractions manageable in a primary health care setting.

Office or Division:	MUNICIPAL HEALTH OF	FICE – Dental	Health Office	
Classification:	Simple			
Type of Transaction:	G2C – Government to C	Citizen		
Who may avail:	Residents of San Ildefon	so, llocos Sur		
CHECKLIST OF REQUIREM	ENTS	WHERE TO	SECURE	
1. Referral slip (If there is	any)	Barangay H	Health Stations (Bl	HS)
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Present referral slip from BHS or Municipal Health Officer</li> <li>Proceed to dental examination room.</li> <li>Proceed to dental service rendered, receive medicine and discharge</li> </ol>	<ul> <li>1.1 Receive referral slip then retrieval or creation of electronic medical record.</li> <li>1.2 Take medical history.</li> <li>1.3 Obtain vital signs.</li> <li>2.1 Perform oral examination.</li> <li>2.2Provide dental services according to client's needs.</li> <li>a) dental health counselling</li> <li>b) oral prophylaxis</li> <li>c) restorative filling</li> <li>d) tooth extraction</li> <li>2.3 Prescribe medicine</li> <li>3.1 Issue official receipt</li> <li>3.2 Dispense</li> </ul>	None None 250.00	1 minute         1 minutes         2 minutes         15 minutes         12 minutes         12 minutes         3 minutes         5 minutes         5 minutes         5 minutes	Dental Aide Mario Friala, DMD (Visiting Dentist) Dr
instructions.	3.2 Dispense drugs/medicines and provide discharge instructions			
	TOTAL	None	45 minutes	



# 6. NATIONAL TUBERCULOSIS CONTROL PROGRAM (Availing of Anti-Tuberculosis Drugs for DS-TB and DR-TB)

This program caters to residents of San Ildefonso, Ilocos Sur with complaint of persistent cough for 2 weeks or more, with other signs and symptoms of Tuberculosis. Clients with referral from public and private hospitals and clinics are also being catered.

Office or Division:	MUNICIPAL HEALTH OFF	FICE – TB DOTS Facility	
Classification:	Simple		
Type of Transaction:	G2C – Government to Citizen		
Who may avail:	Residents of San Ildefon	so, Ilocos Sur	
CHECKLIST OF REQUIREM	ENTS	WHERE TO SECURE	
1. Referral slip		Barangay Health Stations (BHS), Private Physician, Hospital Physician	
2. Direct Sputum Smear Mid (DSSM)/ Sputum Gene Xpe	.,	Referring facility/hospital	
3. Latest Chest X-ray result		Laboratory clinics offering x-ray services	
4.PhilHealth ID/MDR		Local Health Insurance Office (PhilHealth)	

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Present referral slip, results of CXR, DSSM/Gene Xpert (if there is any)</li> </ol>	1.1 Receive referral slip then retrieel or create of electronic medical record.	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I
2. Provide necessary data for history taking.	<ul> <li>2.1 Interview client for history taking.</li> <li>2.2 Obtain vital signs. Record on the Electronic Individual Treatment Record Form (ITR).</li> </ul>	None	2 minutes 2 minutes 5 minutes	Melody Gonzales, RM Jovelyn T. Rin Midwife II
	2.3 Refer the patient to the Municipal Health Officer		1 minute	



3. Proceed to medical consultation area for	3.1 Verify medical history of client	None	2 minutes	Novelyn A. Rafanan, MD
TB patients				Municipal
	3.2 Do physical		10 minutes	Health Officer –
	examination.			TB DOTS
	3.3 Discuss treatment		5 minutes	Physician
	plan with client		5 minutes	,
	3.4 Refer to TB DOTS		3 minutes	
	Nurse Coordinator			
	for additional			
	counselling			
4. Listen to the health	*If the client has	None	15 minutes	Genesis P. Pisco,
education/ instructions and receive the initial	history of TB treatment (Relapse,			MAN, RN Nurse II
TB drugs	Lost to follow up,			
	Failed, Treatment			Sunshine T.
	outcome unknown)			Riego, RM. RN
	refer the client to			Nurse I
	PMDT STC (Bantay			
	RHU for GeneXpert			TB DOTS
	and further			NURSES
	evaluation. * If client is eligible			Novelyn A.
	as			Rafanan, MD
	National Tuberculosis			Municipal
	Program (NTP)			Health Officer –
	beneficiary, enroll			TB DOTS
	client and issue NTP			Physician
	card			Genesis P. Pisco,
				MAN, RN
	4.1 Give health			Nurse II
	education about			
	TB management.			Sunshine T.
	4.2 Emphasize			Riego, RM. RN Nurse I
	importance of			norse r
	Directly Observed			TB DOTS
	Treatment Short			NURSES
	Course (DOTSC) and			
	adherence with			Novelyn A.
	treatment partner			Rafanan, MD
	4.3 Issue initial TB			Municipal
	drugs.			Health Officer –
				TB DOTS
	4.4Instruct client			Physician
	where to report for			
	his/her daily intake			
	of TB drugs.			
	4.5 Inform client of			
	schedule of follow-up			
	sputum re-			
	examination.			



TOTAL None 35 minutes
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#### 7. NATIONAL TUBERCULOSIS CONTROL PROGRAM (Availing of DSSM or Gene Xpert MTB/RIF Assay Test)

Sputum Gene X-pert MTB/RIF test shall be the primary diagnostic tool for all clients especially for the following specific clients belonging to the criteria below with cough of more than 2 weeks or more:

- 1. All retreatment cases (relapse, treatment after failure, treatment after lost to follow up, previous treatment outcome unknown)
- 2. Contacts of DR-TB patients
- 3. Non-converter of Category I
- 4. People living with HIV (PLHIV) with at least one of the four signs and symptoms of TB (fever, cough, weight loss, night sweats)
- 5. Selected vulnerable population which includes inmates in jails and prisons, children less than 15 years old and elderly who are 60 years old and above.
- 6. New cases who are presumptive extra-pulmonary TB
- 7. Senior Citizens and those with co-morbidities

Direct Sputum Smear Microscopy (DSSM) shall be used for follow up sputum monitoring after initiation of anti-TB regimen. To monitor treatment outcome, sputum specimen shall be collected after 2<sup>nd</sup>, 5<sup>th</sup>, and 6<sup>th</sup> month of taking anti-TB medications accordingly.

Office or Division:	MUNICIPAL HEALTH OFFICE			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	Residents of San Ildefonso, Ilocos Sur			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Referral slip		Barangay Health Stations (BHS), private physician, hospital physician		
2. Latest Chest Xray (CXR) result		Laboratory offering X-ray services		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present referral slip, result of CXR	<ol> <li>1.1 Receive referral slip then retrieval or creation of medical record.</li> </ol>	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I TB DOTS NURSES
2. Provide the necessary information	<ul> <li>2.1 Interview client for history taking (i.e., symptoms of TB, if with history of TB treatment, history of exposure).</li> <li>2.3 Obtain vital signs and record on</li> </ul>	None	5 minutes 3 minutes	


3. Proceed to the designated TB consultation area.	the electronic Individual Treatment Record Form (ITR). 2.4 Refer to the Municipal Health Officer 3.1 Verify medical history of client. 3.2 Do physical examination. 3.3 Diagnose and discuss management plan with client.	None	2 minutes 2 minutes 5 minutes 2 minutes	Novelyn A. Rafanan, MD Municipal Health Officer – TB DOTS Physician
4. Listen to the health education on TB and instructions on proper sputum collection.	4.1 Provide health education on TB. 4.2 Give instructions on proper sputum collection.	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I TB DOTS NURSES
5. Submit properly labelled sputum specimen and wait for the date of release of result.	<ul> <li>5.1 Collect sputum specimen along with NTP form.</li> <li>5.2 Inspect quality of sputum specimen.</li> <li>5.3 Submit to GeneXpert PMDT STC (RHU Bantay) for MTB/RIF assay test.</li> <li>5.3 Inform client on the date of release of result.</li> </ul>	None	1 minute 3 minute 30 minutes 1 minute	Melody Gonzales Trained TB Microscopist STC Nurse
	TOTAL	None	1 hour and 5 minutes	



#### 8. ISSUANCE OF DEATH CERTIFICATE

This service caters residents and non-residents of San Ildefonso, Ilocos Sur who died in this municipality, either at home or any part of the municipality.

Office or Division:	MUNICIPAL HEALTH OFF			
Classification:				
	Simple G2C – Government to C			
Type of Transaction:				
Who may avail:	Residents of San Ildefonse authorized representative		elatives of the de	ceasea or meir
CHECKLIST OF REQUIREM	ENTS	WHERE TO	SECURE	
1. Birth Certificate or a	any proof of identity	Office of the	e Municipal Civil R	legistrar
<ol> <li>Previous Hospitaliza any)</li> </ol>	ition record (if there is	Hospital		
3. Narration of the inc	ident	Relatives of	the deceased per	rson
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Sign in the logbook</li> <li>&amp; Present documentary requirements, if</li> </ol>	<ol> <li>1.1 Receive and review documents submitted.</li> </ol>	None	1 minutes	Genesis P. Pisco, MAN, RN Nurse II
available	2.1 Prepare and fill out the death certificate form		3 minutes	Sunshine T. Riego, RM. RN Nurse I Melody Gonzales, RM Jovelyn T. Rin Midwife II
2. Narrate the incident	<ul> <li>2.1 Interview family member/relative of deceased individual.</li> <li>Review cause of death and other pertinent data.</li> <li>2.2 Sign the death</li> </ul>	None	4 minutes	Novelyn A.Rafanan, MD Municipal Health Officer
	certificate.		2 minutes	
3. Pay for death certificate fee.	3.1 Received Order of Payment and Issue OR	50.00 per page	5 minutes	Teresita Rojas Revenue Collection Clerk III
				Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III
				Alvin O. Batuyong



				Revenue Collection Clerk II
4. Receive the copy of the death certificate.	<ul><li>4.1 Encode the information in the death certificate</li><li>4.2 Release signed death certificate</li></ul>	None	9 minutes 1 minute	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I Melody Gonzales, RM Jovelyn T. Rin Midwife II
TOTAL		None	25 minutes	



## 9. ISSUANCE OF MEDICAL CERTIFICATE/ HEALTH CARD

This service caters residents of San Ildefonso, Ilocos Sur who need medical certificate as a requirement prior to school enrolment or employment. Health Certificate ID are issued to operators and employees who are handling food after undergoing physical and laboratory examinations.

Office or Division: Classification:	MUNICIPAL HEALTH OFFICE Simple			
Type of Transaction:	G2C – Government to Citize	an		
Who may avail:	Residents of San Ildefonso, Il			
-				
		WHERE TO	SECURE	
For Students - Results of C Urinalysis, and Chest X-ray	, , , , , , , , , , , , , , , , , , ,			
For Employees – Results of Urinalysis, Chest X-ray, an		Laboratory	Facility of choice	
For Food Handlers - Result Hepatitis A Test (Anti HAV Xray, Sputum Exam			_	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Present requirements upon arrival at Municipal Health Office</li> </ol>	1.1 Receive complete requirements of client.	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I
2. Provide necessary data for history taking.	<ul> <li>2.1 Interview client for history taking.</li> <li>2.2 Get vital signs and record on the electronic Individual Treatment Record Form (ITR).</li> <li>2.3 Refer client the Municipal Health Officer.</li> </ul>	None	5 minutes 2 minutes 2 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I
3. Proceed to medical consultation room.	<ul> <li>3.1 Verify medical history of patient.</li> <li>3.2 Check laboratory results of client.</li> <li>3.3 Do physical examination.</li> <li>3.4 Fill out medical certificate.</li> </ul>	None 180.00	10 minutes	Novelyn A. Rafanan, MD Municipal Health Officer



	3.5 Issue Order payment			
4. Pay	4.1 Receive payment and issue official Receipt	180.00	5 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong Revenue Collection Clerk II
5. Present receipt then claim medical certificate/ health ID	5.1 Check official receipt. 5.2 Release medical certificate/health card accordingly.		5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I Amante Revibes Jr. Sanitation Inspector II
TOTAL		180.00	35 minutes	

## 10. NATIONAL LEPROSY CONTROL PROGRAM (Availing of Anti-Leprosy Drugs)

This service caters to residents of San Ildefonso, Ilocos Sur who have Leprosy and are in need of treatment manageable in a primary health care setting.

Office or Division:	MUNICIPAL HEALTH OFFICE
Classification:	Simple
Type of Transaction:	G2C – Government to Citizen
Who may avail:	Residents of San Ildefonso, Ilocos Sur



CHECKLIST OF REQUIREM	ENTS	WHERE TO	SECURE	
1. Referral slip			ealth Stations (BHS	i), Dermatologist
2. Slit Skin Smear Micr	oscopy result	Laboratory Facility		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Present referral slip from BHS or dermatologist</li> </ol>	1.1 Receive referral slip then retrieve or create of electronic medical record.	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN
2. Provide necessary data for history taking.	<ul><li>2.1 Interview client</li><li>for history taking.</li><li>2.2 Get vital signs</li></ul>	None	e) minutes 3minutes	Nurse I TB DOTS NURSES
	and record on the electronic Individual Treatment Record Form (ITR).			Melody Gonzales, RM Jovelyn T. RIn Midwife II
	2.3 Refer client to the Municipal Health Officer.		2 minutes	
3. Proceed to medical consultation room.	3.1 Verify medical history of client.	None	3 minutes	Novelyn A. Rafanan, MD
	3.2 Do physical examination.		10 minutes	Municipal Health Officer
	3.3 Diagnose and discuss treatment plan with client.		5 minutes	
	3.4 Refer client to Leprosy Nurse Coordinator.		2 minutes	
4. Proceed to Designated Leprosy Treatment Room	4.1 Enrol client for multi-drug therapy.	None	4 minutes	Genesis P. Pisco Nurse II
	4.2 Initiate treatment and observe for any		10 minutes	Leprosy Nurse Coordinator
	adverse reactions. 4.3 Provide remaining medicines with instructions.		5 minutes	Sunshine T. Riego Nurse I ILIS Focal Person
	4.4 Provide health education on Leprosy.		7 minutes	
	4.5 Discharge client.		2 minutes	
TOTAL		None	1 hour and 5 minutes	



#### **11. ISSUANCE OF SANITARY PERMIT**

This service caters to all business establishments and facilities offering services to general public in San Ildefonso, Ilocos Sur. Sanitary permit is issued after the actual inspection and compliance to the requirements.

Office or Division:	MUNICIPAL HEALTH OFFICE			
Classification:	Complex			
Type of Transaction:	G2C – Government to Citizen	/Businesses		
Who may avail:	Residents of San Ildefonso, Ilo	cos Sur		
CHECKLIST OF REQUIR	EMENTS	WHERE TO	O SECURE	
1. Duly filled-out form		Business F	Permit Licensing O	ffice
2. Official Receipt for S	anitary Permit	Municipa	l Treasurer's Offic	e
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E
<ol> <li>Present accomplished application form and complete required documents.</li> </ol>	<ul><li>1.1 Receive and review submitted documents</li><li>1.2 Issue order payment</li></ul>	None 1 <i>5</i> 0.00	4 minutes	Amante Revibes Jr. Sanitary Inspector
2. Pay	2.1 Receive payment and issue official receipt	150.00	2 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong Revenue Collection Clerk II
3. Present OR	<ul> <li>3.1 Check the official receipt submitted and schedule for inspection</li> <li>3.2 Conduct inspection of establishment or facility.</li> <li>3.4 Evaluate inspection results and submit recommendations to the</li> </ul>	1 <i>5</i> 0.00	2 minutes 30 minutes 8 minutes	Amante Revibes Jr. Sanitary Inspector Novelyn A. Rafanan, MD



	Municipal Health Officer for approval or disapproval of application.			Municipal Health Officer
4. Receive Sanitary Permit	4.1 If approved issue sanitary permit.	None	5 minutes	Amante Revibes Jr. Sanitary Inspector
	For DISAPPROVED Clients:			
<ol> <li>Be informed on the deficiencies of the establishment/faci lity</li> </ol>	1.1 Inform client regarding deficiencies of the establishment/facility and give time to correct them.	None	10 minutes	
2. Comply with the deficiencies/ recommendations and submit appeal for re- inspection	<ul> <li>2.1 Receive and verify appeal for re-inspection</li> <li>2.2 Conduct re-inspection of the establishment/facility.</li> </ul>	None	5 days	Amante Revibes Jr. Sanitation Inspector II
	2.3 Evaluate re-inspection results and submission of recommendations to Municipal Health Officer for approval or disapproval of application.		10 minutes	
3. Receive Sanitary Permit	3.1 If compliant, proceed to issuance of sanitary permit.	None	5 minutes	
	TOTAL	Refer to chart	9 days and 50 minutes	

## **12. NUTRITION COUNSELING**

This service is available at the Municipal Health Office and Barangay Health Stations to cater to all residents of San Ildefonso, Ilocos Sur who wish to be advised on nutrition. For severe cases and special needs, patients are referred to MNAO, MHO and to appropriate Facility for proper management. Nutrition counselling also provide mothers of malnourished children as well as pregnant and lactating mothers information on nutrition geared towards improving nutritional status.

Office or Division:	MUNICIPAL HEALTH OFFICE – Municipal Nutrition Action Office (MNAO)
Classification:	Simple
Type of Transaction:	G2C – Government to Citizen



Who may avail:	Residents of San Ildefonso	, llocos Sur		
CHECKLIST OF REQUIREM	IENTS	WHERE TO	SECURE	
1. Referral slip (Optional)		Barangay I	Health Stations (Bl	HS)
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Go to MNAO and state request for counselling.</li> </ol>	<ol> <li>1.1 Receive client's concern/request for information.</li> </ol>	None	2 minutes 3 minutes	Pureza F. Bajo MNAO
	<ol> <li>1.2 Register client's name in logbook for documentation.</li> </ol>			
2. Attend nutritional counselling	3.1Conduct nutritional counselling to client.	None	8 minutes	Pureza F. Bajo MNAO
	3.2 Issue Information Education Campaign materials for reference.		1 minute	
TOTAL		None	15 minutes	

## 13. ADOLESCENT HEALTH AND YOUTH DEVELOPMENT PROGRAM

This service caters to adolescents of San Ildefonso, Ilocos Sur (10-19 years of age) in need of preventive and curative clinical services. This also aims to render a safe place where they can avail better adolescent-sensitive services – "LANG-AY TI AGTUTUBO" – An Adolescent Friendly Health Facility – Level II

Office or Division:	MUNICIPAL HEALTH OFFICE	
Classification:	Simple	
Type of Transaction:	G2C – Government to Citizen (Adolescents)	
Who may avail:	Adolescent residents of San Ildefonso, Ilocos Sur	
CHECKLIST OF REQUIREM	ENTS WHERE TO SECURE	
1. Referral slip (optional)		Barangay Health Stations (BHS), DepEd Nurses, Clinic Teachers

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol> <li>Present referral slip</li> <li>(optional from BHS,</li> <li>DepEd nurse,</li> <li>Guidance Counsellor,</li> <li>MSWDO and others)</li> </ol>	1.1 Receive referral slip then retrieval or creation of medical record.	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II



2. Provide necessary information	<ul> <li>2.1 Interview client for history taking.</li> <li>2.2 Get vital signs and record on the electronic Individual Treatment Record Form (ITR).</li> <li>2.3 Refer client to Municipal Health Officer</li> </ul>	None	5 minutes 3 minutes 2 minutes	Sunshine T. Riego, RM. RN Nurse I Melody Gonzales, RM Jovelyn T. RIn Midwife II
3. Proceed to Adolescent consultation room.	<ul> <li>3.1 Verify medical history of client.</li> <li>3.2 Do physical examination.</li> <li>3.3 Diagnose and discuss treatment plan with client.</li> </ul>	None	3 minutes 10 minutes 2 minutes	Novelyn A. Rafanan, MD Municipal Health Officer
4. Attend counselling	4.1 If needed, conduct adolescent counselling using HEADS and Psychosocial Assessment Form 4.2 If pertinent findings reveal after	None	18 minutes 2 minutes	Genesis P. Pisco Nurse II AHDP Coordinator
	AHDP Counselling, refer back to medical consultation room for further assessment and treatment.			
5. Receive medications and listed to home instructions (if there is any)	5.1 Provide medication and home instructions.	None	5 minutes	Genesis Pisco Nurse II AHDP Coordinator
TOTAL		None	55 minutes	

### **13. SMOKING CESSATION COUNSELING**

This service is given to all residents of San Ildefonso, Ilocos Sur and nearby municipalities who wish to be counselled regarding smoking cessation.

Office or Division:	MUNICIPAL HEALTH OFFICE
Classification:	Simple
Type of Transaction:	G2C – Government to Citizen
Who may avail:	Residents of San Ildefonso, Ilocos Sur



CHECKLIST OF REQUIREMENTS		WHERE TO	WHERE TO SECURE		
1. Referral slip (Optional)		Barangay	Health Stations (B	HS)	
CLIENT STEPS	AGENCY ACTION	FEES TO	PROCESSING	PERSON	
		BE PAID	TIME	RESPONSIBLE	
1. Present referral slip	1.1 Receive referral	None	5 minutes	Genesis P. Pisco,	
from BHS.	slip then retrieve or			MAN, RN	
	create of electronic			Nurse II	
	medical record.				
				Sunshine T.	
				Riego, RM. RN Nurse I	
			<b></b>	INUrse I	
2. Fill out smoking	2.1 Interview client	None	5 minutes	Melody	
cessation form and	for history taking.		2	Gonzales, RM	
provide needed data	2.2 Get vital signs		3 minutes	Jovelyn T. RIn	
	and record on the			Midwife II II	
	electronic Individual				
	Treatment Record				
	Form (ITR).				
			2 minutes		
	2.3 Refer client to				
	the Municipal Health				
	Officer.	-			
3. Proceed to medical	3.1 Verify medical	None	5 minutes	Novelyn A.	
consultation room.	history of client.			Rafanan, MD	
			10 minutes	Municipal Health	
	3.2 Do physical examination.		4	Officer	
	examination.		4 minutes		
	3.3 Diagnose and				
	discuss treatment		1 minute		
	plan with client.				
	3.4 Advise follow up.				
4. Attend counselling.	4.1 Conduct smoking	None	9 minutes	Genesis P. Pisco,	
	cessation counselling.			MAN, RN	
				Nurse II	
	4.2 Provide IEC		1 minute	Sunshine T.	
	materials.			Riego, RM. RN	
5. Fill-out survey on	5.1 Receive	None	2 minutes	Nurse I	
electronic satisfaction	satisfaction summary			Melody	
summary form.	form.			Gonzales, RM	
				Jovelyn T. RIn	
				Midwife II	
			· · ·		
	TOTAL	None	47 minutes		



#### 14. HIV COUNSELING AND TESTING

This service is given to all residents of San Ildefonso, Ilocos Sur and nearby municipalities who wish to be counselled and tested on HIV.

Office or Division:	MUNICIPAL HEALTH OFF	ICE			
Classification:	Simple				
Type of Transaction:	G2C – Government to Citizen				
Who may avail:	Residents of San Ildefonso, Ilocos Sur and nearby municipalities				
CHECKLIST OF REQUIREM	ENTS	WHERE TO	SECURE		
1. Referral slip (Optional)		Barangay	Health Stations (Bl	HS)	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present referral slip (if available)	1.1 Receive referral slip then retrieve or create electronic medical record.	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I	
2. Provide necessary data for history taking.	2.1 Interview client for history taking.	None	5 minutes	Melody Gonzales, RM Jovelyn T. RIn	
	2.2 Get vital signs and record on the electronic Individual Treatment Record Form (ITR).		3 minutes	Midwife II	
	2.3 Refer client to the Municipal Health Officer		2 minutes		
3. Proceed to medical consultation room/ Social Hygiene Clinic	3.1 Verify medical history of client.	None	7 minutes	Novelyn A. Rafanan, MD Municipal	
	3.2 Do physical examination.		10 minutes	Health Officer	
	3.3 Discuss treatment plan with client.		3 minutes		
4. Attend counselling.	4.1 Conduct HIV counselling 4.2 Provide IEC	None	15 minutes	Genesis Pisco, MAN, RN Nurse II	
	materials. 4.3 Get consent for HIV Testing.		1 minute	Sunshine T. Riego, RM. RN Nurse I	
	4.4 Refer to Medical Technologist/ Facility of choice for		3 minutes	HIV Certified Counsellor	
	actual testing.		1 minute		



				HIV Proficient Medical Technologist
5. Proceed to laboratory room/ laboratory of choice	<ul> <li>5.1 Conduct HIV Testing.</li> <li>5.2 Release official result.</li> <li>5.3 Refer back to Municipal Health Officer for further assessment and instructions.</li> </ul>	None	10 minutes 1 minute 1 minute	HIV Proficient Medical Technologist
6. Fill- out survey on electronic satisfaction summary form.	6.1 Receive electronic satisfaction summary form.	None	3 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I TB DOTS NURSES Melody Gonzales, RM Jovelyn T. RIn Midwife II
TOTAL		None	1 hour and 10 minutes	

#### **15. AMBULANCE SERVICE**

This service is given to all residents of San Ildefonso, Ilocos Sur who may be in need of EMERGENCY transportation with skilled health professional. Caters those who are in-patient for transfer to another hospital, accident victims, health emergencies at home in need of first aid and subsequent transport to a health facility.

Office or Division:	MUNICIPAL HEALTH OFFICE					
Classification:	Simple	Simple				
Type of Transaction:	G2C – Government to Citizen					
Who may avail:	Residents of San Ildefonso, Ilocos Sur					
CHECKLIST OF REQUIREMI	AENTS WHERE TO SECURE					
1. Endorsement or report via Hotline number - 09351		Barangay Captains, Barangay Health Stations (BHS), relatives or any concerned citizen.				



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Inquire about availability of ambulance.	<ul> <li>1.1 Receive referral or report</li> <li>1.2 Refer client to the municipal health officer for assessment of the client's case and/or condition for approval of the request.</li> </ul>	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN Nurse I Melody
2. Wait for the staff to retrieve the patient.	2.1 Retrieve the patient from the place provided and instructed by the relatives	None	15 minutes	Gonzales, RM Jovelyn T. RIn Midwife II Philip Purisima
3. Receive first aid.	3.1 Provide first aid 3.2 Transfer patient to a health facility	None	5 minutes Transport time is dependent on the distance from the place of origin to the destination.	Administrative Aide IV Ambulance Driver
4. Fill-out the request form for ambulance use.	<ul> <li>4.1 Receive the filled out form and advised the client to proceed to the treasury office for payment or present letter of indigency.</li> <li>4.2 Issue order of payment</li> </ul>	50.00 per kilometer	2 minutes	
5. Pay	5.1 Receive the payment and issue official receipt.	Refer to order of payment	5 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong Revenue Collection Clerk



		32 Minutes to	
TOTAL	None	1 hour	

#### 16. ANIMAL BITE TREATMENT SERVICES (Referral)

This service caters to residents of San Ildefonso, Ilocos Sur who wish to avail immunization after being bitten by warm-blooded animal, most commonly dog, cat, monkey, etc. Clients are assessed for post exposure management and treatment (i.e., active or passive vaccination).

Office or Division					
Office or Division:		ICE			
Classification:	Simple				
Type of Transaction:	G2C – Government to Citizen				
Who may avail:	Residents of San Ildefon	so, llocos Sur			
CHECKLIST OF REQUIREM	ENTS	WHERE TO	SECURE		
<ol> <li>Referral slip (Option</li> <li>PhilHealth Number /</li> </ol>	•	Barangay	Health Stations (Bl	HS)	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present referral slip from BHS (Optional)	<ol> <li>1.1 Receive referral slip then retrieve or create of electronic medical record.</li> </ol>	None	5 minutes	Genesis P. Pisco, MAN, RN Nurse II Sunshine T. Riego, RM. RN	
2. Provide necessary data for history taking.	<ul> <li>2.1 Interview client for history taking.</li> <li>2.2Get vital signs and record on the electronic Individual Treatment Record Form (ITR).</li> <li>2.3Refer client to the Physician on Duty.</li> </ul>	None	5 minutes 2 minutes 2 minutes	Nurse I Melody Gonzales, RM Jovelyn T. RIn Midwife II	
3. Proceed to medical consultation room.	<ul> <li>3.1 Verify medical history of client.</li> <li>3.2 Do physical examination.</li> <li>3.3 Classify client's category.</li> <li>3.4 Refer client to nearest ABTC</li> </ul>	None	7 minutes 10 minutes 2 minutes 1 minute	Novelyn A. Rafanan, MD Municipal Health Officer	
4. Proceed to Animal Bite Centre and strictly follow the immunization schedule	None	None		Animal Bite Treatment Center	



TOTAL	None	35 minutes	

## 17. ISSUANCE OF EXHUMATION PERMIT/TRANSFER OF CADAVER PERMIT

This service caters residents of San Ildefonso, Ilocos Sur who wish to exhume and transfer remains of a deceased individual.

Office or Division:	MUNICIPAL HEALTH OFFICE				
Classification:	Simple				
Type of Transaction:	G2C – Government to Citizen				
Who may avail:	Residents of San Ildefonso, Ilocos Sur				
CHECKLIST OF REQUIREM	ENTS	WHERE TO	SECURE		
Exhumation Permit - Death certificate (Original copy); Body must be buried for 10 years or more Transfer of Cadaver Permit – Death Certificate		Office of the	e Municipal Civil R	egistrar	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Present requirements.	<ul> <li>1.1 Receive and assess completeness of requirements and advise the client to pay the necessary fees.</li> <li>Exhumation permit</li> <li>Transfer of Cadaver permit</li> <li>1.2 Issue order of payment</li> </ul>	400.00 300.00	4 minutes	Amante R. Revibes Jr Sanitation Inspector II	
2. Proceed to the Treasurer's Office and pay the corresponding fees.	2.1 Receive the payment and issue official receipt.	Refer to order of Payment	5 minutes	Teresita Rojas Revenue Collection Clerk III Merriam C. Revibes BPLO Designate/ Revenue Collection Clerk III Alvin O. Batuyong	



				Revenue Collection Clerk II
3. Present the Official	3.1 Issue Exhumation	None	5 minutes	Amante R.
Receipt and claim permit.	Permit or Transfer of			Revibes Jr
	Cadaver Permit			Sanitation
				Inspector II
TOTAL		None	15 minutes	



# **MUNICIPAL ASSESSOR'S OFFICE**

**External Services** 



## 1. ISSUANCE OF CERTIFIED COPY OF ASSESSMENT RECORD OF REAL PROPERTY AND ALL OTHER RELATIVE TO ITS ASSESSMENT

The Tax Declaration (TD) serves as the municipal permanent record for every real property unit (Land, Building and Machinery) .

A Certified true copy of Tax Declaration and all other records relative to its assessment may be requested from the Municipal Assessor's Office.

Office or Division:	MUNICIP	al assessor's c	OFFICE			
Classification:	Simple					
Type of transaction:	G2C - Government to Citizen					
Who may avail:		Property Owner or his authorized representative				
CHECKLIST OF RE				WHERE TO S		
Requesting should be the authorized representative • Authorization letter, Attorney from the p be notarized	' Special P	ower of	•	Client		
CLIENT STEPS	AGENO	CY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBL E	
1. Fill-out request form and submit to the receiving clerk	1.1 1.2 1.3	Assist clients to fill-out request form Issue order of payment Advise client to pay at Municipal Treasurer Office (MTO) Forward request to Record/ Assessment /Appraisal Division	Certific ations – *True Copy *Cert. of Landh oldings *Cert. of No Improv ement *Vicinit y Map *Cert. of Latest Tax *Sec. Fee P70.00/ RPU Doc. Stamp: P30/RP U	3 minutes	Jonalyn P. Palado Bookbinder II (Receiving Clerk) Noel G. Barcena Admininistr ative Aide IV	
2. Present Official Receipt at Record/			None	25 minutes	Winston A. Palomares	



Assessment/Apprais al Division	2.1	Receive request form			Bookbinder II
	2.2	Indicate Official			Jenifer P. Pisco Local
		Receipt No. on request Form			Assessment Operation
	2.3	Pull out record desired,			Officer (LAOO II)
		verify, prepare,			Restituto P.
		recheck requested record			Viloria Municipal Assessor
	2.4	Indicate official receipt on			
		requested document			
	2.5	Local Assessment Operation			
		<b>Officer</b> (LAOO) II affix			
	2.6	signature Forward to Municipal			
		Assessor for her			
	2.7	signature Municipal Assessor			
	2.8	affix signature Send back			
		request form including			
		requested documents			
		to receiving clerk			
3. Receive requested document and affix signature on	3.1	Request client to	None	2 minutes	Jonalyn P. Palado
logbook		receive			



3.2	requested document by affixing his/her signature on logbook Release document requested to client File request form			Bookbinder II
	TOTAL	None	31 Minutes	

## 2. TRANSFERRING OF OWNERSHIP/POSSESSION OF REAL PROPERTY

Property Owner Acquired Real property through Deed of Conveyance (Sale, Donation, Sheriff's Sale) request for this service. Updated Tax Dec. under the name of New Owner is given upon submitting all documents and pay the necessary fees, taxes by the owner.

Office or Division:	MUNICIPAL ASSESSOR'S OFFICE					
Classification:	SIMPLE					
Type of transaction:	G2C - Government to Ci	G2C - Government to Citizen				
Who may avail:	Property Owner or his authorized representative					
CHECKLIST OF RE	QUIREMENTS	V	VHERE TO SI	ECURE		
•	Title/Tax Declaration Certificate n (CAR) on Fee Certification eipt . Fee elinquency of Real	<ul> <li>LC</li> <li>Au</li> <li>Bu</li> <li>Re</li> <li>Pr</li> <li>O'</li> <li>M</li> <li>O'</li> </ul>	otary Public and Registro uthority (LR, ureau of Inte evenue (BIR ovincial Tre ffice unicipal Tre ffice otary Public	ation A) ernal 2) easurer's easurer's		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBL E		



1. Fill-out request form	1.1 Assist client to	Sec.		Jonalyn P.
and submit to the	fill out request form	Fee	3 minutes	Palado
receiving clerk	1.2 Receive filled up form	P70.00 /RPU		Bookbinder
	1.3 Advise client			11
	to be ready of the required			
	documents 1.4 Prepare order			
	of payment and advise client to pay			
	Sec. 1.5 Fee at the treasurer's			
	office. 1.6 Forward			
	request form to			
	Record/Asses sment/Apprai			
	sal Division			
<ol> <li>Present the required documents</li> </ol>	<ul> <li>2.1 Inspect Submitted document for completeness and validity</li> <li>2.2 Pull out records</li> </ul>		40 minutes	<b>Winston A.</b> <b>Palomares</b> Bookbinder II
	affected by transaction			Jenifer P.
	2.3Prepare			Pisco
	requested documents			Local Assessment
	2.4Indicated on FAAS and Tax			Operation Officer II
	Declaration the CAR No./Official			
	Receipt No. of Transfer Fee/Doc			Restituto P. Viloria
	No. /Page No. /Book No. /Year of			Municipal Assessor
	Notarization			73353201
	/Name of Notary Public			
	2.5Local Assessment Operation Officer			



3. Receive requested	signa 2.6 Mun affix 2.7 Reca app requ doc Prov	DO) II Affix ature icipal Assessor signature ommend the roval of the uested ument to the incial Assessor a. Send back request form including requeste d documen ts to the receiving clerk.		2	Jonalvn P.
3. Receive requested documents	2.1 2.2 2.3	Request client to receive requested document by affixing his/her signature on logbook Release document requested by client and advice to proceed to the office of the Provincial Assessor for the approval of the requested document File request form	None	2 minutes	Jonalyn P. Palado Bookbinder II
		IOIAL	None	Minutes	



## 3. ISSUANCE OF NEW ASSESSMENTS ON REAL PROPERTY TAX DECLARATION DUE TO RECLASSIFICATION INITIATED BY TAXPAYER/LANDOWNER.

Property Owner Acquired Real property through Deed of Conveyance (Sale, Donation, Sheriff's Sale) request for this service. Updated Tax Dec. under the name of New Owner is given upon submitting all documents and pay the necessary fees, taxes by the owner.

Office or Division:	MUNICIPAL ASSESSOR'S (					
Classification:	SIMPLE					
	G2C - Government to Citizen					
Type of transaction:						
Who may avail: CHECKLIST OF RE	Property Owner or his authorized representative EQUIREMENTS WHERE TO SECURE					
	QUIKEMENIS	V				
<ul> <li>Letter Request</li> <li>Zoning Certificat</li> <li>Tax Declaration</li> <li>Official Receipt Fee</li> </ul>	te of Tax Declaration/ Sec.	<ul> <li>Client</li> <li>Municipal Planning Development Office</li> <li>Municipal Assessor's Office</li> <li>Municipal Assessor's Office</li> </ul>				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBL E		
1. Fill-out request form and submit to the receiving clerk	<ul> <li>1.1 Assist client to fill- out request form</li> <li>1.2 Receive filled out form</li> <li>1.3 Advise client to pay Inspection Fee at treasurer's office</li> <li>1.4 Ask owner's letter request for reclassification (if requester is not the owner of the land, require client to present authorization from the owner)</li> <li>1.5 Forward request to Record Assessment. Appraisal Division</li> </ul>	Sec. Fee P70.0 O/RPU True copy of Tax Dec. P70.0 O/RPU Doc. Stamp: P30/RP U	3 minutes	Jonalyn P. Palado Bookbinder II (Receiving Clerk)		



2. Present Tax Declaration	<ul> <li>1.1 Ask for copy of tax declaration of the land subject of request</li> <li>1.2 Pull out record</li> </ul>	None	80 minutes	<b>Winston</b> <b>Palomares</b> Bookbinder II
	affected 1.3 Verify ownership 1.4 Conduct ocular inspection and record findings of Field Appraisal and Assessment Sheet			<b>Noel G. Barcena</b> Admininistr ative Aide IV
	(FAAS) 1.5 Go back to the office for completion of FAAS			Jenifer P. Pisco LAOO II
	<ul> <li>1.6 Prepare tax declaration of the new assessment record</li> <li>1.7 Recommend approval of the requested document to the Provincial Assessor</li> <li>1.8 Send back request form including requested documents to the receiving clerk</li> </ul>			<b>Restituto P.</b> Viloria Municipal Assessor
3. Receive documents with the Municipal Assessor's inspection report and affix signature on logbook	Request client to receive requested document by Affixing his/her signature on logbook Release document requested by client and advice to proceed to the office of the Provincial Assessor for the	None	2 minutes	<b>Jonalyn P.</b> <b>Palado</b> Bookbinder II (Receiving Clerk)



approval of the requested document File request form			
TOTAL	None	85 Minutes	

## 4. ISSUANCE OF NEW ASSESSMENTS ON REAL PROPERTY TAX DECLARATION DUE TO SUBDIVISION/CONSOLIDATION OF OWNERSHIP.

Office or Division:	MUNICIPAL ASSESSOR'S	OFFICE			
Classification:	SIMPLE				
Type of transaction:	G2C - Government to Citizen				
Who may avail:	Property Owner or his authorized representative				
CHECKLIST OF RE	EQUIREMENTS WHERE TO SECURE				
<ol> <li>3 copies Photocopy of</li> <li>3 copies Photocopy of</li> <li>3 copies Photocopy of Registration (CAR)</li> <li>Transfer Fee Certification Office)</li> <li>Official Receipt of Sec</li> <li>Non delinquency of Receipting of Receipting (Municipo)</li> <li>3 copies of Photocopy consolidated/subdivis</li> </ol>	f Title/Tax Declaration f Certificate Authorizing on (Provincial Treasurers . Fee eal Property Tax al Treasurers Office) y of Approved	<ul> <li>Notary Public Attorney</li> <li>Land Registration Authority (LRA)</li> <li>Bureau of Internal Revenue (BIR)</li> <li>Provincial Treasurer's Office</li> <li>Municipal Treasurer's Office</li> <li>Department of Environment and Natural Resources (DENR)</li> </ul>			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCES SING TIME	PERSON RESPONSIBL E	



	1.5	Forward request form to Record/Assess ment/Apprais al Division		
2. Present Required documents	2.1 2.2 2.3 2.4 2.5	Receive request form Inspect submitted documents for completeness and validity Pull out records affected by transaction Reflect subdivision/ consolidation on section map/base map Prepare requested documents Indicate on FAAS & Tax Declaration the CAR No./Oficial Receipt No. of transfer Fee/Doc No./Page No./Book No,/Year of Notarization/N ame of Notary Public	40 minutes	Winston A. Palomares Bookbinder II Jenifer P. Pisco LAOO II Restituto P. Viloria Municipal Assessor
3. Receive documents with the with the	3.1	Require client to receive	2	Jonalyn P.
supporting documents and		requested document by	minutes	Palado



	3.3	Assessor for the approval of the same File request form		
	3.2	Release document requested by client and advise to proceed to the office of the Provincial Assessor for		Clerk)
affix signature on logbook		affixing his/her signature on logbook		Bookbinder II (Receiving

## 5. ISSUANCE OF NEW ASSESSMENTS ON REAL PROPERTY TAX DECLARATION DUE TO IMPROVEMENT

Office or Division:	MUNICIPAL ASSESSOR'S OFFICE			
Classification:	SIMPLE			
Type of transaction:	G2C - Government to C	itizen		
Who may avail:	Property Owner or his au	thorized r	epresentati	ve
CHECKLIST OF RE	QUIREMENTS	V	VHERE TO SE	CURE
<ol> <li>Tax declaration</li> <li>Approved building plan,</li> <li>Building permit,</li> <li>Certificate of completion,</li> <li>Certificate of occupancy</li> <li>Permit, or sworn statement of the market value of the property</li> </ol>			unicipal Ass unicipal Eng	
<ol> <li>Certificate of occupar</li> <li>Permit, or sworn statem</li> </ol>	псу		unicipal Ass	-
<ol> <li>Certificate of occupar</li> <li>Permit, or sworn statem</li> </ol>	псу			-

	1.1		3EC.		Jonulyn P.	
and submit to the		fill-out request	Fee	3	Palado	
receiving clerk		form	P70.00	minutes	Bookbinder	
	1.2	Receive filled-	/RPU		II	
		out form			(Receiving	
	1.3	Advise client	True		clerk)	
		to be ready of	сору			



	the required documents 1.4 Forward request form to Record/Assess ment/Appraisa I Division	of Tax Dec. P70.00 /RPU Doc. Stamp: P30/RPU		
2. Present Required documents	<ul> <li>2.1 Ask for copy of tax declaration of the land where improvement is erected</li> <li>2.2 Pull out records affected by transaction</li> </ul>			<b>Winston A.</b> <b>Palomares</b> Bookbinder II
	2.3 Require client to present approved building plan and building permit and/or certificate of completion or certificate of		80 minutes	Noel G. Barcena Admininistr ative Aide IV Jenifer P. Pisco
	occupancy permit or in the absence, Sworn Statementof the market value of the property 2.4Conduct ocular inspection and record findings on <b>Field</b>			LAOO II <b>Restituto P.</b> <b>Viloria</b> Municipal Assessor
	Appraisal and Assessment Sheet (FAAS) 2.5 Appraised the log/ improvement as per actual as built plan 2.6 Establish ownership of			



	TOTAL	None	85	
3. Receive requested documents with the supporting documents and affix signature on logbook	<ul> <li>1.1 Require client to receive requested document by affixing his/her signature on logbook</li> <li>1.2 Release document requested by client and advise to proceed to the office of the Provincial Assessor for the approval of the same</li> <li>1.3 File request form</li> </ul>		2 minutes	Jonalyn P. Palado Bookbinder II (Receiving Clerk)
	the new improvement 2.7 Go back office for completion of FAAS 2.8 Prepare tax declaration 2.9 LAOO II affix signature 2.10 Forward to Municipal Assessor for his signature 2.11 Recomm end the approval of the requested document to the Provincial Assessor 2.12 Send back request form including requested documents to the receiving clerk			



# **MUNICIPAL ACCOUNTING OFFICE**

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External and Internal Services



## 1. ISSUANCE OF ACCOUNTANT'S CHECK ADVICE FOR MUNICIPAL CHECK DISBURSMENTS

The accountant's check advice is a document issued to inform the authorized depository bank of the local government unit of the issuance of a payment having the certain check number, date of issue and amount of the check.

Office or Division:	Municipal Accounting Office					
Classification:	Simple					
Type of Transaction:	G2C/G2B/G2G – Governmen	t to Client/C	Government to			
	Business/Government to Govern	nment				
Who may avail:	Creditors/ Suppliers/ Contractor	Creditors/ Suppliers/ Contractors				
CHECKLIST OF REQUIRE	MENTS	WHERE TO	) SECURE			
Approved Disbu	rsement Voucher	Office of t	he Mayor			
Signed Check		Office of t	he Mayor			
CLIENT STEPS	AGENCY ACTIONS	FEES TO	PROCESSIN	PERSON		
		BE PAID	G TIME	RESPONSIBLE		
1. Submit	1.1 Check completeness of	NONE	5 minutes			
requirements.	documents submitted.					
	1.2 Record disbursement		10 minutes			
	voucher in Journal.			Gladys Joy		
			2	Soliven- Ugale,		
	1.3 Generate BIR Form 2306 and 2307 if		3 Minutes	СРА, СМА		
	applicable			Municipal Accountant		
	1.4 Prepare Accountant's		4 minutes	Accountain		
	check advice		4 11110165			
	1.5 Sign Accountant's check		2 minutes			
	advice and BIR Form.					
2. Receive the	2.1 Issue the Accountant's	None	2 minutes	1		
Accountant's check	check advice.					
advice.						
TOTAL		None	29 minutes			

#### 2. ISSUANCE OF REPORT OF DISBURSEMENT (ROD) FOR TRUST FUND PROJECTS

A statement showing the amount received and disbursements incurred for a particular project funded by the national government. It is submitted either monthly, quarterly or yearly depending on the reportorial requirements of the source agency.

Office or Division:	Municipal Accounting Office				
Classification:	Simple				
Type of Transaction:	G2G – Government to Govern	ment			
Who may avail:	Funding national government a	gency			
CHECKLIST OF REQUIRE	MENTS	WHERE TO SECURE			
Request letter	Request letter		Agency concern		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1. Give the request letter	<ol> <li>1.1 Prepare needed report and its supporting documents</li> </ol>	None	20 minutes	Gladys Joy Soliven- Ugale, CPA, CMA	



	1.2 Route ROD to other		20 minutes	Municipal
	signatories; Municipal			Accountant
	Treasurer, Municipal			
	Planning Development			
	Officer, Municipal Budget			Elizabeth Ramos
	and Municipal Mayor.			Municipal Treasurer
				reasurer
				Arch. Ryan Jay
				Pecho
				MPDO
				Zenaida G.
				Ricod
				Municipal
				Budget Officer
				Officer
				Christian Daniel
				A. Purisima
				Mayor
2. Receive document	2.1 Release document	None	2 minutes	Gladys Joy
(ROD) and sign in	(ROD) to client.			Soliven- Ugale,
the releasing				CPA, CMA
logbook.				Municipal
			40 1 1	Accountant
TOTAL		None	42 minutes	



## LOCAL YOUTH DEVELOPMENT OFFICE

EXTERNAL SERVICES



## 1. REGISTRATION OF YOUTH ORGANIZATIONS (YOs) AND YOUTH SERVING ORGANIZATIONS (YSOs)

All Youth and Youth-Serving Organizations may register to the Municipal Youth Development Office (co-located at the Municipal Treasury Office) and be assisted for the registration to the National Youth Commission's Youth Organization Registration Program.

Office or Division:	Municipal Youth Deve	elopment Of	fice	
Classification:	Simple			
Type of Transaction:	G2C – Government	to Organizat	ions	
Who may avail:	Residents of San Ilde	fonso, llocos	Sur	
CHECKLIST OF REQUIREM	ENTS	WHERE TO SI	ECURE	
Accomplished Youth Organization Profile Form Directory of Officers and Advisers (Hard and Soft (in excel file) List of members in good standing (Hard and		Organized c Organized c	outh Developmer and registered gro and registered gro and registered gro	pup
CLIENT STEPS	A CENICY A CTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
ON SITE REGISTRATION	L			
logbook & submit all requirements.		None	5 minutes 10 minutes 10 minutes 2 minutes	Rica Joy P. Quilon Administrative Aide IV /Designate LYDO Cristel Louise DP Tremor PPSK President Christian Daniel Purisima Mayor
	2.1.Record, and release the certificate of registration	None	3 minutes	Mayor Rica Joy P. Quilon Administrative Aide IV /Designate LYDO



	TOTAL	NONE	30 minutes	
CLIENT STEPS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
ONLINE REGISTRATION			•	
1. Submit requirements via email	<ol> <li>1.1 Receive and acknowledge receipt of email</li> <li>1.2 Check requirements if complete and duly signed.</li> </ol>		1 minute 5 minutes	Rica Joy P. Quilon Administrative Aide IV /Designate LYDO
	1.2. Process the certification a. Register to the Youth Organization Database		10 minutes	
	b. Encode certification		10 minutes	Cristel Louise DP Tremor PPSK President
	1.3 Sign the Certification		2 minutes	Christian Daniel Purisima Mayor
2. Receive the Certificate of Registration via email	2.1.Record, and release the certificate of registration via email	None	2 minutes	Rica Joy P. Quilon Administrative Aide IV /Designate LYDO
TOTAL		NONE	30 minutes	<u> </u>

## VI. FEEDBACK AND COMPLAINTS

FEEDBACK AND COMPLAINTS MECHANISMS		
How to send feedback	Answer the client feedback form and drop it in the designated Comment and Suggestion Box located at the Public Assistance and Complaint Desk. • Message feedback at the LGU San Ildefonso Facebook Page (https://www.facebook.com/LGUsanildefonsoilocossur	



How feedback is processed	<ul> <li>The assigned Officer of the Day opens the drop box and compiles and records all feedback submitted to Human Resource Management Office (MHRMO) every week.</li> <li>Positive and negative feedbacks will be forwarded to concerned office/personnel. For negative feedbacks, the concerned office/personnel will be required to explain in written addressed to HRMO within 72 hours upon receipt hereof.</li> <li>The explanation of the office/personnel will then be relayed to the client.</li> <li>For inquiries and follow-ups, clients may contact the HRMO</li> <li>For feedbacks posted at the Facebook page (LGU San Ildefonso), it will be forwarded to concerned office/personnel and will reply the soonest.</li> </ul>
How to file a complaint	<ul> <li>Fill-up the client Complaint Form located at the Public Assistance and Complaint Desk. Submit the form to the officer of the day for proper recording.</li> <li>Complaints may be also filed via telephone and social media at LGU San Ildefonso Facebook Page Make sure to provide the following information:</li> <li>Name of complainant, contact number and date of complaint</li> <li>Name of the person/office being complained</li> <li>Incident</li> <li>Evidence</li> <li>For inquiries and follow-ups, clients may send a message the LGU San Ildefonso Facebook Page (https://www.facebook.com/LGUsanildefonsoilocossur</li> </ul>
How complaints are processed	<ul> <li>The Human Resource and Management Officer evaluates submitted complaints.</li> <li>Upon evaluation, the HRMO shall start the investigation and forward the complaint to the relevant office for their explanation.</li> <li>The HRMO will create a report and will be submitted to the Local Chief Executive for appropriate action.</li> <li>The HRMO will give feedback to the client for the action taken.</li> <li>For inquiries and follow-ups, clients can message the LGU San Ildefonso Facebook Page (https://www.facebook.com/LGUsanildefonsoilocossur)</li> </ul>



Contact Information of ARTA, PCC, CCB

A R T A: complaints@arta.gov.ph PCC CCB: 80898088 -881-6565 (SMS)

## V. LIST OF OFFICES

OFFICE	ADDRESS	CONTACT NUMBER
MAYOR'S OFFICE	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0936 959 6442
MUNICIPAL SOCIAL WELFARE AND DEVELOPMENT OFFICE	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0917-118-0364
MUNICIPAL BUDGET OFFICE	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0917 693 6168
HUMAN RESOURCES MANAGEMENT OFFICE	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0917 693 6168
OFFICE OF THE MUNICIPAL CIVIL REGISTRAR	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0917-155-1962
MUNICIPAL AGRICULTURE OFFICE	Municipal Stage, San Ildefonso, Ilocos Sur	0917 500 5207
MUNICIPAL PLANNING AND DEVELOPMENT OFFICE	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0916 223 9330
SANGGUNIANG BAYAN OFFICE	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0917 701 6651
GENERAL SERVICE OFFICE	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0927 879 6916
MUNICIPAL TREASURER'S OFFICE	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0977 811 3780
MUNICIPAL ENGINEERING OFFICE	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0977-815-0319
OFFICE OF THE BUILDING OFFICIAL	1st Floor, Municipal Hall, San Ildefonso, Ilocos Sur	0977-815-0319
OFFICE OF THE PUBLIC EMPLOYMENT SERVICE	Rural Health Unit, Pob. East, San Ildefonso, Ilocos sur	09988407130
OFFICE OF THE MUNICIPAL HEALTH OFFICER	Rural Health Unit, Pob. East, San Ildefonso, Ilocos sur	0935 146 8697
OFFICE OF THE MUNICIPAL HEALTH OFFICER		